



Instructions: Please print or type ALL information on this form. You may refrain from answering any questions which you feel would betray your confidentiality, but the more we know about you the better we can serve you.

ID/Passport \_\_\_\_\_

I want Europass Supplement

Status:  New Applicant  Former Student

Student No. (former student): \_\_\_\_\_

Student Name: \_\_\_\_\_

Maiden Name: \_\_\_\_\_

Home Address: \_\_\_\_\_

Day Phone: \_\_\_\_\_

WhatsApp: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Country: \_\_\_\_\_

E-mail: \_\_\_\_\_

Title:  Mr.  Ms.  Mrs.  Rev.  Dr.

Country of Citizenship: \_\_\_\_\_

Marital Status:  Single  Married  Widowed  Divorced

Primary Language Spoken: \_\_\_\_\_

Gender:  Male  Female

Primary Religious Affiliation:  Assemblies of God

Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
DD Month Year

Other Pentecostal  Protestant  Catholic

(Example: 05 / JAN / 87)

Other (Specify) \_\_\_\_\_

PROGRAM OF STUDY

(Please select only one)

Ministerial Studies:  Level 1 (Certified)  Level 2 (Licensed)  Level 3 (Ordained)

Other BSB Programs:  Bible and Doctrine  Christian Service  Undeclared

- I agree that it is my responsibility to verify the applicability of BSB courses toward my educational goals and I understand that Ministerial credentials are not issued by Global University.
I agree to the regulations governing the study program set forth by the Berean School of the Bible (BSB) catalog under which I am applying and understand that my completion of this study program does not guarantee my acceptance for any position by any church or organization.
I understand e-mail is considered a primary method for communication and is intended to meet the academic and administrative needs of the University. I agree to monitor my Global University student e-mail account on a regular basis.

Appropriate application fee is included (refer to fee schedule).

The application fee is non-refundable five business days after this form is received by Global University.

Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
DD Month Year

Applicant's Signature: \_\_\_\_\_

Print Full Name: \_\_\_\_\_

FOR REGIONAL/NATIONAL OFFICE USE ONLY

BSB IntlApplication - EN 20091119

Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
DD Month YY

I recommend this student for the institute-level program he or she has indicated.

National Office Code: \_\_\_\_\_

Director's Signature: \_\_\_\_\_

FOR INTERNATIONAL OFFICE USE ONLY

Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
DD Month YY

I recommend this student for the institute-level program he or she has indicated.

Global University Registrar's Signature: \_\_\_\_\_