



# GOD'S BIBLE SCHOOL & COLLEGE

Application for Admission

# Application Checklist

Please submit the following items as part of your application for enrollment

- Application
- \$25 Application Fee/\$50 International Application Fee  
*Making an official campus visit or participating in VIP Day may waive this fee. Call Student Recruitment to schedule a visit – 800-486-4637 ext. 217.*
- SAT Reasoning Test Scores  
*The SAT is offered at limited times throughout the year. Visit [www.collegeboard.com](http://www.collegeboard.com) for testing dates and registration information. Please include GBSC's school code, 1238, on the SAT application so the scores will be sent to us.*
- Official High School Transcript  
*An official transcript is one that's signed or sealed and includes a graduation date.*
- Pastor's Recommendation
- Teacher's Recommendation
- Professional's Recommendation
- Photograph
- Work-Study Application (optional)

**No SAT  
or ACT with  
Writing?**  
[Click here...](#)

## Additional requirements for international applicants

- English Proficiency  
*All students are required to achieve satisfactory scores on the SAT and, if necessary, the TOEFL. See the current Catalog for SAT and TOEFL score information.*
- Financial Certification/Affidavit of Sponsorship Form
- Physical Examination

## Send all correspondence to

Office of Admissions  
1810 Young Street  
Cincinnati, OH 45202-6838

Once all items are received, your admissions file will be evaluated and a decision made concerning your admission. You will receive notification of the College's decision.

For assistance with your application, contact the Office of Admissions by phone, 800-486-4637, or email, [gbs4u@gbs.edu](mailto:gbs4u@gbs.edu).



# Application for Admission

## Applicant

Full name: \_\_\_\_\_ Preferred name: \_\_\_\_\_

Home mailing address: \_\_\_\_\_  
\_\_\_\_\_

Home phone number: \_\_\_\_\_ Cell phone number: \_\_\_\_\_

Email address: \_\_\_\_\_ Date of birth: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ Gender:  Male  Female

Marital status:  Single  Married  Widowed  Divorced\*  Separated\*  Single Parent\*

*\* Send a letter of explanation with application.*

Number of dependents (including spouse and children): \_\_\_\_\_ Legal state of residence: \_\_\_\_\_

U.S. citizen:  Yes  No If no, do you have U.S. permanent resident status?  Yes  No

Country of citizenship (if other than U.S.): \_\_\_\_\_ Place of birth: \_\_\_\_\_

First language (if other than English): \_\_\_\_\_

Ethnic background:  African-American  Asian-American  Caucasian  Hispanic/Latino  
 Native American  International

Non-U.S. citizens, please indicate the following:

Visa type: \_\_\_\_\_ Admissions number: \_\_\_\_\_

## Family

Name of father/guardian: \_\_\_\_\_

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

Phone number: \_\_\_\_\_

Name of mother/guardian: \_\_\_\_\_

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

Phone Number: \_\_\_\_\_

Parent marital status:  Married  Separated  Divorced  Remarried  Single Parent

Your primary residence:  with both parents  with mother  with father  other (specify): \_\_\_\_\_

Are your parents/guardians in sympathy with your attending God's Bible School and College?  Yes  No

Has any member of your family ever applied for admission to or attended God's Bible School and College?  Yes  No



# Application for Admission

## Admissions

Admissions status:

- First-time freshman (you have never attended college)
- New student with no transfer credit
- New student with transfer credit
- Re-admission (you have previously attended God's Bible School and College)
- Non-degree seeking

Expected entrance term:  Fall semester  Spring semester Year: 20\_\_

Expected enrollment:  Full-time  Part-time

Expected length of study: \_\_\_\_\_ years

If you do not plan to graduate from God's Bible School and College, please give reason: \_\_\_\_\_

Are you applying to live in the residence hall?  Yes  No Note: Traditional students (single, under age 25) must live on campus

Do you plan to bring an automobile to campus?  Yes  No

Which of the majors offered do you plan to pursue? Note: All students at God's Bible School and College have a major in Bible.

Bachelor of Arts degrees:

- Church and Family Ministry  Church Music  Elementary Education
- Intercultural Studies and World Missions  Ministerial Education  Music Education
- Secondary English Education  Undecided

Associate of Arts degrees:

- Bible and Theology  Business  Elementary Education
- General Studies  Intercultural Studies and World Missions  Music Ministry  Undecided

How did you learn about God's Bible School and College?

- PR group  VIP Day  Alumni  Website  *God's Revivalist*  Other: \_\_\_\_\_

Have you attended VIP Day or made an official campus visit within the last two years?

- Yes  No If yes, when? \_\_\_\_\_

Attendance reason (check two most important to you):

- Academic  Accreditation  Faculty  Family
- Financial  Location  Social  Spiritual

What current GBSC student or employee most influenced your decision to attend? (if none, leave blank) \_\_\_\_\_

Have you previously applied to attend God's Bible School and College?  Yes  No

If yes, what term? Semester: \_\_\_\_\_ Year: \_\_\_\_\_



# Application for Admission

## Education

High school graduation date (month, day, year): \_\_\_\_\_

GED date (month, day, year): \_\_\_\_\_

High school or GED testing center name: \_\_\_\_\_

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

Phone Number: \_\_\_\_\_

Class rank: \_\_\_\_\_ of \_\_\_\_\_

Type of high school attended:  Public  Private  Christian  Home school

Type of curriculum:  Conventional  ACE  A Beka  Other: \_\_\_\_\_

Please list all colleges, Bible institutes, or technical schools you have attended. If more space is needed, please submit information on a separate sheet.

1. Name of school: \_\_\_\_\_ Phone number: \_\_\_\_\_

Mailing address: \_\_\_\_\_

Dates attended: \_\_\_\_\_ Major: \_\_\_\_\_

Did you graduate?  Yes  No If yes, what was your degree and major? \_\_\_\_\_

2. Name of school: \_\_\_\_\_ Phone number: \_\_\_\_\_

Mailing address: \_\_\_\_\_

Dates attended: \_\_\_\_\_ Major: \_\_\_\_\_

Did you graduate?  Yes  No If yes, what was your degree and major? \_\_\_\_\_

Do you expect to transfer credits from another college?  Yes  No

## Religion

Denomination: \_\_\_\_\_ Name of church: \_\_\_\_\_

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

Pastor: \_\_\_\_\_ Pastor's phone number: \_\_\_\_\_

Have you accepted Jesus Christ as your personal Savior?  Yes  No

Do you attend church regularly?  Yes  No

Please give a brief description of your Christian experience: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

In what Christian work have you participated? \_\_\_\_\_

\_\_\_\_\_

Do you plan to enter full-time ministry?  Yes  No  Not sure

If yes, in what capacity? \_\_\_\_\_

Are you in sympathy with the doctrine of God's Bible School and College?  Yes  No



# Application for Admission

## Finances

Responsible party's name: \_\_\_\_\_ Phone number: \_\_\_\_\_

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

How do you plan to finance your education?  Support of parents, relatives, and friends

Federal and state financial aid programs  Off-campus employment  GBSC work-study program

Do you have any major outstanding debt?  Yes  No

Have you applied for federal/state aid?  Yes  No

Are you a veteran or currently serving in the U.S. military and eligible to receive VA benefits?  Yes  No

## Medical Background

*Check the appropriate boxes:*

Do you have any present illness(es)? .....  Yes  No

Do you have any history of any serious illness(es)? .....  Yes  No

Do you have any significant allergies? .....  Yes  No

Are you presently taking any type of medication? .....  Yes  No

Do you have any type of condition that limits your physical activities? .....  Yes  No

*If any of the above answers is yes, please give complete details on a separate sheet of paper.*

Emergency Contact: \_\_\_\_\_

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

Phone number: \_\_\_\_\_ Relationship to applicant: \_\_\_\_\_

## Special Considerations

Do you have any significant physical or learning impairments? .....  Yes  No

Have you ever been treated for any nervous, mental, or emotional disorders? .....  Yes  No

Have you ever used illegal drugs? .....  Yes  No

Do you drink alcoholic beverages? .....  Yes  No

Do you use tobacco in any form? .....  Yes  No

Were you ever expelled, dropped, or suspended in high school or college? .....  Yes  No

Are you, or have you ever been, under the supervision of a parole officer or court? .....  Yes  No

Have you ever been arrested? .....  Yes  No

*If any of the above answers is yes, please give complete details on a separate sheet of paper.*

## Admission Agreement

I certify that the information on this application is complete and accurate to the best of my knowledge. If admitted to God's Bible School and College, I will comply with the rules and standards, both on and off campus, in accordance with the aims and obligations in the *Catalog* and *Student Handbook* as long as I am enrolled as a student.

Applicant's signature: \_\_\_\_\_ Date: \_\_\_\_\_

*Note: If applicant is under 18 years of age, a parent/guardian is required to endorse the following statement.*

I support the rules and standards of God's Bible School and College and desire that my son/daughter attend this institution.

Parent/guardian signature: \_\_\_\_\_ Date: \_\_\_\_\_

God's Bible School and College does not discriminate on basis of age, race, color, national or ethnic origin, or against otherwise-qualified, physically-challenged persons in its admission of students or employment of its faculty and staff.



# Pastor Recommendation Form

Please have this recommendation form completed by someone other than a relative.

## To Be Completed By The Applicant

I hereby authorize the release of the following information to be considered in my application for admission to God's Bible School and College. I understand that the information will be held in confidence and will not be released to me or anyone else. I understand the person completing this form will mail it directly to God's Bible School and College.

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Applicant's name (please print)

Signature of applicant

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Street address

City, State, Zip code

Phone number

## To Be Completed By The Person Recommending the Applicant

Please help us make an educated decision in the selection of students by filling out this form with fair, honest information regarding the applicant. Please include any information regarding the applicant's past that could negatively affect his/her time at GBSC and/or be potentially detrimental to fellow students or the College. Also, let us know his/her special talents and abilities. This information will be held strictly confidential and will not be made available to the applicant. Thank you for your assistance!

---

Name (please print)

Signature

---

Street address

City, State, Zip code

Phone number



# Pastor Recommendation Form

How long have you known the applicant? \_\_\_\_\_ In what relationship? \_\_\_\_\_

How well do you know the applicant?  Very well  Well  Casually  Acquaintance  Not at all

Marital status of the applicant:  Never married  Currently married  Separated  Divorced  Remarried

Please comment on the applicant's Christian commitment: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Describe the applicant's special talents, interests, and activities: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please rate the applicant in the following areas by circling the appropriate number.

*(1-poor, 2-below average, 3-average, 4-above average, 5-superior, blank-unable to answer)*

Leadership Skills	1 2 3 4 5	Social Skills	1 2 3 4 5	Responsibility/Reliability	1 2 3 4 5
Personal Integrity	1 2 3 4 5	Maturity	1 2 3 4 5	Physical Health/Stamina	1 2 3 4 5
Emotional Stability	1 2 3 4 5	Self-Image	1 2 3 4 5	Personal Hygiene	1 2 3 4 5
Concern for Others	1 2 3 4 5	Self-Motivation	1 2 3 4 5	Respect for Authority	1 2 3 4 5
Common Sense	1 2 3 4 5	Moral Character	1 2 3 4 5	Discretion with the Opposite Sex	1 2 3 4 5

Do you have any concerns about the applicant's ability to adjust to college life and academic requirements?

Yes  No If yes, please explain: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Do you recommend the applicant to God's Bible School and College?  Yes  No

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please mail this completed form to:

**Office of Admissions—God's Bible School and College • 1810 Young Street • Cincinnati, OH 45202-6838**



# Teacher Recommendation Form

Please have this recommendation form completed by someone other than a relative.

## To Be Completed By The Applicant

I hereby authorize the release of the following information to be considered in my application for admission to God's Bible School and College. I understand that the information will be held in confidence and will not be released to me or anyone else. I understand the person completing this form will mail it directly to God's Bible School and College.

---

Applicant's name (please print)

Signature of applicant

---

Street address

City, State, Zip code

Phone number

## To Be Completed By The Person Recommending the Applicant

Please help us make an educated decision in the selection of students by filling out this form with fair, honest information regarding the applicant. Please include any information regarding the applicant's past that could negatively affect his/her time at GBSC and/or be potentially detrimental to fellow students or the College. Also, let us know his/her special talents and abilities. This information will be held strictly confidential and will not be made available to the applicant. Thank you for your assistance!

---

Name (please print)

Signature

---

Street address

City, State, Zip code

Phone number



# Teacher Recommendation Form

How long have you known the applicant? \_\_\_\_\_ In what relationship? \_\_\_\_\_

How well do you know the applicant?  Very well  Well  Casually  Acquaintance  Not at all

Marital status of the applicant:  Never married  Currently married  Separated  Divorced  Remarried

Please comment on the applicant's Christian commitment: \_\_\_\_\_

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Describe the applicant's special talents, interests, and activities: \_\_\_\_\_

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Please rate the applicant in the following areas by circling the appropriate number.

*(1-poor, 2-below average, 3-average, 4-above average, 5-superior, blank-unable to answer)*

Leadership Skills	1 2 3 4 5	Social Skills	1 2 3 4 5	Responsibility/Reliability	1 2 3 4 5
Personal Integrity	1 2 3 4 5	Maturity	1 2 3 4 5	Physical Health/Stamina	1 2 3 4 5
Emotional Stability	1 2 3 4 5	Self-Image	1 2 3 4 5	Personal Hygiene	1 2 3 4 5
Concern for Others	1 2 3 4 5	Self-Motivation	1 2 3 4 5	Respect for Authority	1 2 3 4 5
Common Sense	1 2 3 4 5	Moral Character	1 2 3 4 5	Discretion with the Opposite Sex	1 2 3 4 5

Do you have any concerns about the applicant's ability to adjust to college life and academic requirements?

Yes  No If yes, please explain: \_\_\_\_\_

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Do you recommend the applicant to God's Bible School and College?  Yes  No

Comments: \_\_\_\_\_

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Please mail this completed form to:

**Office of Admissions—God's Bible School and College • 1810 Young Street • Cincinnati, OH 45202-6838**



# Professional Recommendation Form

Please have this recommendation form completed by someone other than a relative.

## To Be Completed By The Applicant

I hereby authorize the release of the following information to be considered in my application for admission to God's Bible School and College. I understand that the information will be held in confidence and will not be released to me or anyone else. I understand the person completing this form will mail it directly to God's Bible School and College.

---

Applicant's name (please print)

Signature of applicant

---

Street address

City, State, Zip code

Phone number

## To Be Completed By The Person Recommending the Applicant

Please help us make an educated decision in the selection of students by filling out this form with fair, honest information regarding the applicant. Please include any information regarding the applicant's past that could negatively affect his/her time at GBSC and/or be potentially detrimental to fellow students or the College. Also, let us know his/her special talents and abilities. This information will be held strictly confidential and will not be made available to the applicant. Thank you for your assistance!

---

Name (please print)

Signature

---

Street address

City, State, Zip code

Phone number



# Professional Recommendation Form

How long have you known the applicant? \_\_\_\_\_ In what relationship? \_\_\_\_\_

How well do you know the applicant?  Very well  Well  Casually  Acquaintance  Not at all

Marital status of the applicant:  Never married  Currently married  Separated  Divorced  Remarried

Please comment on the applicant's Christian commitment: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Describe the applicant's special talents, interests, and activities: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please rate the applicant in the following areas by circling the appropriate number.

*(1-poor, 2-below average, 3-average, 4-above average, 5-superior, blank-unable to answer)*

Leadership Skills	1 2 3 4 5	Social Skills	1 2 3 4 5	Responsibility/Reliability	1 2 3 4 5
Personal Integrity	1 2 3 4 5	Maturity	1 2 3 4 5	Physical Health/Stamina	1 2 3 4 5
Emotional Stability	1 2 3 4 5	Self-Image	1 2 3 4 5	Personal Hygiene	1 2 3 4 5
Concern for Others	1 2 3 4 5	Self-Motivation	1 2 3 4 5	Respect for Authority	1 2 3 4 5
Common Sense	1 2 3 4 5	Moral Character	1 2 3 4 5	Discretion with the Opposite Sex	1 2 3 4 5

Do you have any concerns about the applicant's ability to adjust to college life and academic requirements?

Yes  No If yes, please explain: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Do you recommend the applicant to God's Bible School and College?  Yes  No

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Please mail this completed form to:

**Office of Admissions—God's Bible School and College • 1810 Young Street • Cincinnati, OH 45202-6838**



# Work-Study Application

## Personal Information

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

Mailing address: \_\_\_\_\_

Home phone number: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Date of birth (month, day, year): \_\_\_\_\_ Nationality: \_\_\_\_\_

Gender:  Male  Female

Marital status:  Single  Married  Engaged—wedding date: \_\_\_\_\_

Height: \_\_\_\_\_ Weight: \_\_\_\_\_

Expected enrollment term:  Fall semester  Spring semester Year: 20\_\_\_\_

School classification:  Freshman  Sophomore  Junior  Senior

Number of credit hours you expect to take: \_\_\_\_\_ Requested number of work hours per week:  10  20

Do you plan to bring an automobile to campus?  Yes  No

## Work Experience

List work history, beginning with the most recent. If additional space is needed, attach information on a separate sheet of paper.

Month/Year	Name & address of company Supervisor's name/telephone	Position	Reason for leaving
From:			
To:			
Job description:			
From:			
To:			
Job description:			
From:			
To:			
Job description:			

## Physical Record

Do you have any physical condition that may limit your ability to perform a job assigned to you?  Yes  No

If yes, please describe: \_\_\_\_\_

\_\_\_\_\_



# Work-Study Application

## Financial Information (To be filled out by parent/guardian)

Parent/guardian name: \_\_\_\_\_

Mailing address: \_\_\_\_\_

Home phone number: \_\_\_\_\_ Work phone number: \_\_\_\_\_

Adjusted gross income for 20\_\_\_\_ (from federal income tax form): \_\_\_\_\_

I, the parent/guardian of \_\_\_\_\_, have reviewed the above information and verify that it is correct. I agree that I will notify the school of any substantial change in my financial status. I also understand that any falsification of the above information may result in my child's work position being revoked.

Parent/guardian signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Student Agreement

- Have you completed and submitted the Free Application for Federal Student Aid (FAFSA)?  Yes  No
- If you or your parents are in a position to pay all of your expenses, you will be expected to enroll as a full-pay student. The privilege to work one's way through school is reserved for those who would not otherwise be able to attend.
- Students may work their way through school on one of two plans:
  1. Full-work—requires a college student to work 20 hours per week; approximately covers room and board charges.
  2. Half-work—requires a college student to work 10 hours per week; covers about half of room and board charges.

Student signature: \_\_\_\_\_

Date: \_\_\_\_\_

Parent/guardian signature: \_\_\_\_\_ (required for students under 18)

Date: \_\_\_\_\_

Mail this completed form to:  
**Office of Admissions—God's Bible School and College**  
**1810 Young Street**  
**Cincinnati, OH 45202-6838**



# Transcript Request Form

Please have your high school and any colleges or universities you have attended submit an official transcript directly to us. Student copies are acceptable for preliminary evaluation.

## Directions

Contact each academic institution for transcript fee and address information.  
You may send this form and transcript fee to the academic institution. Make copies, as needed.  
Official transcripts must be sent directly from the issuing institution to the Office of Admissions.

## Issuing Academic Institution

Student name: \_\_\_\_\_

Social Security Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Last date of attendance: \_\_\_\_\_

Name/address while in attendance

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please send an Official Transcript to:

**Office of Admissions**  
**God's Bible School and College**  
**1810 Young Street**  
**Cincinnati, OH 45202-6838**

Signature: \_\_\_\_\_



# FAQs

## **Someone told me that I could get my application fee waived if I visit campus. How do I schedule a visit?**

You're right – by making an official campus visit, you don't have to pay that fee! GBSC considers a visit important for learning about the College and acclimating to campus life. Just call Student Recruitment to schedule a visit (800-486-4637), or join many others in visiting on VIP Day (held each spring).

## **I haven't graduated yet but would like to go ahead and apply. What can I do about my official high school transcript?**

Send your most recent high school transcript for now; we can use that for the admissions process. Then send an official transcript as soon as you graduate.

## **My dad's the pastor of my church. What should I do about a pastor's recommendation?**

We prefer that recommendations be completed by someone other than a relative. Please have an associate pastor, deacon, or other church leader write the recommendation.

## **Why do you ask for a photograph?**

The pictures are a form of ID and serve as reminders to our student recruiters. (They see thousands of students each summer and might have forgotten your last name.) Snapshots are great.

## **Do I need to wait until I get all my application materials together before sending them in?**

Please send each application item as you get it done. Recommendation forms should be sent directly from the one filling out the form, as the forms are confidential.

## **Where can I find information about taking the SAT Reasoning Test?**

The SAT is offered only seven times each year and requires advance registration. You can find information regarding specific dates and registration from your high school or at [www.collegeboard.com](http://www.collegeboard.com). Please include GBSC's code, 1238, on your SAT registration so the scores will be sent directly to us.

## **More questions?**

Call us at 800-486-4637 or email [gbs4u@gbs.edu](mailto:gbs4u@gbs.edu).

