

# ADMISSION APPLICATION



## APPLICATION INSTRUCTIONS

## TRANSFER APPLICANTS

## TRANSIT APPLICANTS

## COLLEGE APPLICANTS

## SEMINARY APPLICANTS

## NON-DEGREE APPLICANTS

## ALL APPLICANTS

# Bethany Divinity College and Seminary

ATTN: Admissions Office, Post Office Box 1944, Dothan, AL 36302 U.S.A.

*PRINT legibly in ink OR type response to ALL items and sign the application on page 4. Return it along with the required \$50.00 non-refundable application fee.*

Students must complete ALL of pages 2 and 3 of this application. On page 4 complete #1, #2, and #3 through the "POLICY AND DOCTRINAL STATEMENT" section. Once the evaluation is completed, the application will be returned to you with the evaluation assessment, for your final signature in section #4 entitled "FINAL APPROVAL."

BDC/S accepts both first year and transfer students. If you are a transfer student you must request that the registrar at each post-secondary institution in which you have enrolled since graduation from high school, mail an official copy of your transcript directly to the Admissions Office.

If you are enrolling with BDC/S as a transit student, you will need to request that the registrar or dean of the college in which you are currently enrolled complete a transit authorization or statement of courses enrolled in and mail it directly to the Admissions Office.

If you have not earned a bachelor's degree and wish to take undergraduate courses in pursuit of a degree, you must request the registrar at each post-secondary institution in which you have enrolled since high school, to mail an official copy of your transcript directly to the Admissions Office.

If you have earned a bachelor's degree of 120 semester hours and wish to take graduate studies in pursuit of a higher degree, you must request the registrar at each post-secondary institution in which you have enrolled since high school to mail an official copy of your transcript directly to the Admissions Office. You are required to furnish BDC/S with a copy of each degree that you have been issued.

If you wish to enroll for individual courses and do not wish to pursue a degree, you may enroll as a part-time student into the course(s) of your choice. For information regarding cost(s), contact the Admissions Office.

All applications must be accompanied by a billfold size, chest-to-head photograph of the prospective student only. *Do not include other people in photo.*

## ENROLLMENT INFORMATION

**LAST NAME**                    **↑**                    **FIRST NAME**                    **↑**                    **MIDDLE NAME**

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Physical Address (if different) \_\_\_\_\_

Phone Home (\_\_\_\_\_) \_\_\_\_\_ Work Phone (\_\_\_\_\_) \_\_\_\_\_

E-mail Address \_\_\_\_\_

Place of Birth: City \_\_\_\_\_ State \_\_\_\_\_ Country \_\_\_\_\_

Enrolling in which program? \_\_\_\_\_

**Marital Status**

- Single     Divorced  
 Married    Other

Social Security Number \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Date of Birth \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Sex    Male     Female

\_\_\_\_\_  
Name of Spouse

## ETHNIC ORIGIN INFORMATION

(This information required by Civil Rights Act)

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Caucasian (Non-Hispanic) | <input type="checkbox"/> Black (Non-Hispanic)  | <input type="checkbox"/> American Indian |
| <input type="checkbox"/> Asian Pacific Islander   | <input type="checkbox"/> Hispanic              | <input type="checkbox"/> Alaskan Native  |
| <input type="checkbox"/> Korean                   | <input type="checkbox"/> Other - Specify _____ |  |

## CITIZENSHIP INFORMATION

Place of Birth: \_\_\_\_\_

Are you a citizen of the United States?    Yes    **No**    *If answered NO, answer questions below:*

Of what country are you a citizen? \_\_\_\_\_

Are you a permanent resident of the United States?    Yes    No

Alien Registration Number \_\_\_\_\_

Do you presently have a United States Visa?     Yes    No

**If yes**, what type? \_\_\_\_\_ Expiration Date: \_\_\_\_\_

## TO HELP US USE GOD'S MONEY WISELY, PLEASE ANSWER THE FOLLOWING QUESTIONS:

How did you hear about Bethany?     Friend     Radio     TV     Newspaper     Publication

If a newspaper or publication, which one? \_\_\_\_\_



### 1) FINANCIAL INFORMATION

In an effort to assist the student, we have provided several additional modes of payment.  
**ANY** credit or debit card may be used for books, fees, and tuition payments.

**SELECT ONE PLAN ONLY.** . . .

- PLAN I** One (1) course at a time. **NO** other discount-sheet applicable. For payment instructions, contact the college.
- PLAN II** **20% discount**, listed on *BLUE* sheet. Enclose payment in full after signing and mailing FINAL APPROVAL. **NO other discount-sheet applicable.**
- PLAN III** Enclose down payment of \$150.00 after signing and mailing FINAL APPROVAL. Balance is to be paid in 12 monthly installments through Bethany Tuition Management Program. Bethany's Scholarship form can be used with this plan only. The Blue sheet does **NOT** apply. Please remember a late fee of \$ 25.00 will be applied to your account each month your payment is late.

### 2) REFUND POLICY

Student wishing to withdraw from the college or drop a program of study must do so within 30 days after receiving the course materials. Please read the Withdrawal Procedure that is found in the catalogue. If you do not have a catalogue you may request one to be mailed to you or you may go on-line to the college website: <http://www.bethanybc.edu> to download the current catalogue.

I understand that my signature in the **Refund Policy** section of this application will constitute that I have read and understand the refund policy of Bethany Divinity College and Seminary, Inc.

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

### 3) POLICY AND DOCTRINAL STATEMENT

I agree to abide by the college regulations and policies as set forth in the catalogue. Also by the signing of this application, it certifies that I have read, I understand, and I respect the doctrine statements presented in the college catalogue.

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE

### 4) FINAL APPROVAL

Do not sign this section until you have received your evaluation assessment from Dr. Kevin Freeman, Administrative Dean.

I understand that my signature in the **FINAL APPROVAL** section of this application will constitute a contract with Bethany Divinity College and Seminary, Inc. concerning my Liability.

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
School Official's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date