



NATIVE AMERICAN BIBLE COLLEGE

PO Box 248, Shannon, NC 28386

Application

Full Name _____ SS# _____ Birth Date _____

Home Phone _____ Cell Phone _____ E-mail _____

Mailing Address _____

City _____ State _____ Zip _____

Physical Address _____

City _____ State _____ Zip _____

Last year of school completed? (Circle one) 10 – 11 – 12 – GED - Some College – College Degree

When do you plan to begin your studies? 20____ Fall Spring

Where do you plan to live? On campus Off campus

What time of day are you planning to attend classes? Day Night

What kind of courses are you interested in?

- Personal Enrichment (non-credit classes designed to enrich your life)
- 2-year Associate Degree 3-year Diploma 4-year Bachelor Degree

Please check Program Majors you are interested in:

- Bible & Christian Education Bible & Ministerial Studies Bible & Missions

How did you hear about NABC? _____

Why did you choose NABC? _____

Are you a United States Citizen? Yes No

Have you ever been convicted of a crime? Yes No

(If yes, please explain on a separate sheet of paper and attach to the application, please include dates.)

References

Pastoral Reference:

Pastor's Name _____ Church _____

Home Phone _____ Work Phone _____ Cell _____

E-mail _____

Street Address _____

City _____ State _____ Zip _____

Educator or Professional Reference:

*Educator’s reference is preferred. Recent High School graduates should provide an Educator’s Reference.

Educator’s Name _____ Home Phone _____

E-mail _____

Mailing Address _____

City _____ State _____ Zip _____

School Name _____ School Phone _____

School Mailing Address _____

City _____ State _____ Zip _____

Personal Reference:

Acquaintance’s Name _____ Phone _____

Cell Phone _____ E-mail _____

Mailing Address _____

City _____ State _____ Zip _____

*We will mail reference forms to your listed references directly.

I authorize the named references above to disclose to **NABC** any and all information related to my acceptance as a student, without giving me prior notice of such disclosure. I understand that the information contained in these references is confidential and I willingly waive my right to see them.

Signature _____ Date _____

I verify that all information contained is true and, if accepted as a student, I am willing to submit to the rules and regulations of Native American Bible College.

Signature _____ Date _____

Be sure the following items are completed and a \$25.00 check* (non-refundable) is attached:

- 1. Application is fully completed and signed .
- 2. Please attach on a separate sheet of paper your personal testimony of your salvation experience.

*Please note: Your application will not be processed unless it is completed and application fee is received.

Mail your application form to:

Native American Bible College
Office of Registrar
PO Box 248
Shannon, NC 28386

Please visit our website at www.nativeamericanbiblecollege.org

Contact us by E-mail Admissions@nativeamericanbiblecollege.org or by phone (910) 843-5304