

# Spanish Eastern District Bible Institute Of The Assemblies of God, Inc.

Hammonton Campus  
100 French Street / P. O. Box 542  
Hammonton, NJ 08037

Oficiales del Distrito Hispano Del Este  
Rev. Rafael Reyes, Superintendente del Distrito  
Rev. Virginia Maldonado, Director de Educación

Administración del Campus de Hammonton, NJ  
Rev. Alberto Torres, Principal  
Rev. Juan Plumey & MC Ana Santana, Asistentes

## APPLICATION FORM

### PERSONAL DATA

- Name: \_\_\_\_\_  
Last First Middle Int. Mother's Maiden Name
- Address: \_\_\_\_\_  
Street# City State Zip Code
- Telephone: Hm. (\_\_\_\_) \_\_\_\_ - \_\_\_\_ Wk. (\_\_\_\_) \_\_\_\_ - \_\_\_\_ Cell. (\_\_\_\_) \_\_\_\_ - \_\_\_\_
- Social Security #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Sex: Male \_\_\_\_\_ Female \_\_\_\_\_
- Date of Birth: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Place: \_\_\_\_\_ Age: \_\_\_\_\_
- Marital Status: Single \_\_\_\_\_ Married \_\_\_\_\_ Separated \_\_\_\_\_ Divorced \_\_\_\_\_ Re-Married \_\_\_\_\_
- If married, please give spouse's name: \_\_\_\_\_
- Father's Name: \_\_\_\_\_ Mother's Name: \_\_\_\_\_

### SCHOLASTIC DATA

- Highest Grade Completed: High School 1<sup>st</sup> \_\_\_ 2<sup>nd</sup> \_\_\_ 3<sup>rd</sup> \_\_\_ 4<sup>th</sup> \_\_\_ College 1<sup>st</sup> \_\_\_ 2<sup>nd</sup> \_\_\_ 3<sup>rd</sup> \_\_\_ 4<sup>th</sup> \_\_\_
- Name of High School: \_\_\_\_\_
- Name of College: \_\_\_\_\_
- Have you ever studied in an Assemblies of God Institute? Yes \_\_\_ No \_\_\_ If yes, what year? \_\_\_\_\_
- Name & address of Institute: \_\_\_\_\_  
\* Transcript(s) must be brought to office. \*
- How many years completed? \_\_\_\_\_
- Have you ever studied in another Bible Institute? Yes \_\_\_ No \_\_\_ If yes, what year? \_\_\_\_\_
- How many years completed? \_\_\_\_\_
- Name & address of Institute: \_\_\_\_\_  
\* Transcript(s) must be brought to office. \*

\* For office use only \*

Date Rec'd: \_\_\_ / \_\_\_ / \_\_\_ Fee Paid: \_\_\_\_\_ Term: \_\_\_\_\_

**CHRISTIAN EXPERIENCE**

- 1. How long have you been a born again Christian according to John 3:1-7? \_\_\_\_\_
- 2. Have you received the Holy Spirit according to Acts 2:4? Yes \_\_\_ No \_\_\_ If yes, when? \_\_\_\_\_
- 3. Have you been baptized in water? Yes \_\_\_ No \_\_\_ If yes, when? \_\_\_\_\_

Name of church you attend: \_\_\_\_\_

Address: \_\_\_\_\_  
Street# City State Zip Code ( ) Telephone -

Present position in Church: \_\_\_\_\_

**EMPLOYMENT DATA**

- 1. Are you currently employed? Yes \_\_\_ No \_\_\_

2. Name of employer: \_\_\_\_\_

Address: \_\_\_\_\_  
Street# City State Zip Code ( ) Telephone -

- 3. In Case of an emergency, who should we notify?

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

Telephone: ( ) - Relationship: \_\_\_\_\_

**For Pastor Only**

1. Name of Church: \_\_\_\_\_ Denomination \_\_\_\_\_

Address: \_\_\_\_\_  
Street# City State Zip Code ( ) Telephone -

2. Pastor's Name: \_\_\_\_\_

Address: \_\_\_\_\_  
Street# City State Zip Code ( ) Telephone -

- 3. Do you know of any reason why the applicant should not be admitted to this institute? Yes \_\_\_ No \_\_\_  
If Yes, please provide an attached explanation.

4. Do you endorse the applicant's testimony? Yes \_\_\_ No \_\_\_

5. Will you notify this office if there is a spiritual change in this individual? Yes \_\_\_ No \_\_\_

6. Will the Church be responsible for any or all outstanding tuition owed this Bible institute by the applicant?  
Yes \_\_\_ No \_\_\_

**THE FOLLOWING ADDITIONAL ITEMS SHOULD BE FORWARDED TO THE BIBLE INSTITUTE:**

- 1. \$25.00 Application fee (1<sup>st</sup> tuition payment)
- 2. Transcripts from any other Bible Institutes
- 3. Photograph with this application

I certify that to the best of my knowledge, all the responses in this application are true. I will abide by all the rules and regulations of the Spanish Eastern District Bible Institute of the Assemblies of God.

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Pastor's Signature Date Applicant's Signature Date