

2008-2009

Application For Admission Part 1

Wilsey Bible Training Center



410 North Street, Wilsey, KS 66873 - (785) 497-2996 - wilseyks.org -- ccwilsey@tctelco.net

Full Name: (Last) _____ (First) _____ (Middle) _____

Address: (street) _____ (City) _____ (State) _____ (Zip) _____

Home Phone: (____) _____ Cell Phone _____ Email _____

Date of Birth: __/__/__ M: ___ F:___ Marital Status: Married___ Single___ Widowed___ Divorced___ # Children ___

Drivers License: (State) _____ Number _____ (Please attach a copy. And a picture ID)

Vehicle: _____ Liscence No. _____ Insurance Co. _____

For which week(s) are you applying? Week (1-52) _____

Dates: _____ through _____

If married, do you plan to bring your spouse and family with you? Yes___ No ___ Spouse Name: _____
(Off campus housing is very limited)

For emergency purpose we need the name, address and phone number of a parent, or your nearest living relative:

Name _____ Phone No. (____) _____

Address: (street) _____ (City) _____ (State) _____ (Zip) _____

Information Required for a Visa

Place of Birth: _____

Citizenship: _____

Do you possess a current passport? Yes___ No___ If no, you must apply for one immediately!

Authority of Passport (place issued according to Passport) _____

PERSONAL INFORMATION (this information, as with all of the application, will be held in strict confidence)

Are you a vegetarian?___ Do you have any other special dietary needs? _____

Are you a current smoker? Yes_____ No_____ Note: all facilities are non smoking, on campus or in dorms.

Education: Year completed: High School _____ GED _____ College _____ Trade School _____

Job experience 1. _____ 2. _____ 3. _____

Hobbies: 1. _____ 2. _____ 3. _____

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MEDICAL INFORMATION

Are you in good health? Yes___ No___ When was your last complete physical examination?_____

Do you have physical handicaps? Yes___ No___ (explain)_____

List any major illness you have had:_____

Do you have any communicable diseases? (explain)_____

Are you presently on medication or under a physician's care? (Explain)_____

Have you ever been hospitalized or admitted to a treatment facility for any reason? If so, where?(explain)_____

Do you presently have health insurance? Yes___ No___ Company: _____Policy #_____

When was your last Tetanus shot:_____ (a recent Tetanus shot is required; a copy is needed for the file)

STATEMENT OF FAITH

On a separate sheet of paper, please write a brief but concise statement of your belief regarding the following:

1. The Bible
2. God
3. Jesus Christ
4. Holy Spirit
5. Sin
6. Salvation
7. Baptism with the Holy Spirit
8. Eschatology (end time events)
9. The Rapture
10. Eternal Security

Write a paragraph describing how you became a believer. How did you hear of God's Salvation Plan? When?

PRACTICAL CHRISTIAN MINISTRY

Each week of Wilsey Bible Training Center, every student takes a course entitled "Practical Christian Ministry". The focus of this course is to teach students how to serve the needs of the body of Christ. Every student serves each afternoon in a practical area of service here at the Wilsey Bible Training Center in capacities such as housekeeping, kitchen, landscaping, etc. This will also include the various building projects in the town of Wilsey as needed.

FINANCIAL RESPONSIBILITY

Application fee \$25 Non refundable.

Part time Students: Full payment of \$150 per week tuition is due and payable during registration hours 2-4 PM Sunday.

Full Time Students (12 consecutive weeks of training) prepaid \$1,650

One time charge of \$40 for Word for Today Bible with Chuck Smith. With Highlighter and Pace schedule (required).

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Application For Admission part 3

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AGREEMENT

- 1. I understand my responsibility for punctual, regular class attendance and the fulfillment of class assignments.*
- 2. I will cooperate in observing all regulations and upholding the standards of the school.*
- 3. I understand that Wilsey Bible Training Center is a non accredited 3 Semester of Bible educational program.*
- 4. I understand that this is a Bible Training Center and that modest apparel will we required at all times.*
- 5. I understand that I will be assigned one bunk and a small area for personal items. I am responsible for my own bedding and laundering of clothes.*
- 6. I understand that I cannot bring a TV, "worldly" music or video games to campus.*
- 7. I understand that I must have my own health insurance and sign a Liability Waiver.*

Signed: _____ Date: _____

APPLICATION CHECKLIST

Have you. . .

- 1. Completely filled out the application in the manner requested?*
- 2. Enclosed your \$25 application fee (this is non-refundable)? Make checks payable to Wilsey Bible School.*
- 3. Enclosed a small photograph of yourself for our records?*
- 5. Signed and dated this application.*

Wilsey Bible Training Center does not discriminate on the basis of race, sex, ethnic background, native language, nationality or physical disability.

Please mail to:
Attention: Registrar

Wilsey Bible Training Center
410 North Street
Wilsey, KS 66873

(785) 497-2996