Unity Faith & Truth Bible College 349 Copperfield Blvd Ste L Mailbox 244 Concord, NC 28025

Website: uftbc.org Phone: (704) 761-7618 Email: Info@uftbc.org



APPLICATION OF ADMISSION								
APPLICANT INFORMATION								
Last Name:	First Name:	M.I						
Mailing Address:								
City:	State:	Zip:	Zip:					
Date of Birth:	Home Phone:	Cell Pl	Cell Phone:					
Email Address:								
	EMPLOYMENT 1	NFORMATION						
Current Employer:		How Long?	How Long?					
Employer Address:								
Employer City, State,	, Zip:							
Employer Phone Number:		Employer Fax:						
	MINISTRY IN	FORMATION						
Name of Local Churc	h:							
Church Address:	- 1							
Pastor's Name:			's Phone:					
Are you a minister?	Yes: No Licensed? Yes: No	Ordained? Yes: No						
	n or organization do you belong							
List other Ministries that you participate with and your function:								

REFERENCE						
Reference Relative/Friend:			Relationship			
Address:						
City/State/Zip:						
	ole who may be	interested in attending U		Truth Bible College		
Name:			Phone:			
Email:						
Name:			Phone:			
Email:						
Theology I	Divinity	Christian Education eclared on the application. I degrees after the suit Associate students can only che r students may choose Biblical t choose One Concentration, Cl torate Must Choose may choose	There will be ad bmission. oose Bible Studic studies or Theolo pristian Educatio	ditional fees and courses for changing ogy ONLY on, Theology, or Divinity		
		ETHNIC ORI	GIN			
	anic) Ameri	Asian Pacific Islander_ can Indian/Alaskan —	_ Hispanic			
Country of Birth	: Are you a	n American Citizen Yes	No			
If no, please answ	wer the following	ng questions. Of what cou	untry are you	a citizen?		

EDUCATIONAL INFORMATION								
Name Of High School:		County:		State:				
Date of Graduation:								
	1	,						
If you did not graduate, have you	Yes	When:						
obtained a GED?	No							
LIST ALL COLLEGES THA	T YOU HAVE A	ATTENDED IN (CHRONOLOGIC.	AL ORDER				
Name of Institution:		State:						
Dates Attended From:	То:							
Degree Received:		Hours Earned:						
Name of Institution:		State:						
	_							
	To:		T .	Γ				
Degree Received:	Hours Earned:							
			1					
Name of Institution:	State:							
Dates Attended From:	То:		1					
Degree Received:	Hours Earned:							

CURRENT STATUS

ARE YOU CURRENTLY ENROLLED IN THE LAST INSTITUTION ATTENDED: IF SO WHAT WILL BE YOUR LAST DATE OF ATTENDANCE: ARE YOU ELIGIBLE FOR RE-ADMISSION TO ANY OF THE INSTITUTIONS LISTED: YES NO

IF NO, ARE REASONS ACADEMIC DISCIPLINARY OR OTHER (ATTACH EXPLANATION)

ADDITIONAL INFORMATION:

- \$55.00 NON-REFUNDABLE APPLICATION FEE MUST BE SUBMITTED WITH THIS APPLICATION. PAYMENTS CAN BE MADE VIA CASH APP TO \$UFTBC
 - TUITION IS DIVIDED INTO BI-MONTHLY PAYMENTS IF NOT PAID IN FULL
 - THE TEXTBOOK FEES MUST BE PAID BEFORE RECEIPT OF ANY MATERIAL
- \bullet THE GRADUATION FEES MUST BE PAID EACH YEAR BEFORE RECEIPT OF THE DEGREE
 - THE BALANCE OF THE TUITION MUST BE PAID BEFORE GRADUATION

I have completed this application to the best of my ability and have been truthful to the best of my knowledge in answering all questions. I do hereby agree to abide by the high ethical standards set forth by Unity Faith & Truth Bible College and to conduct myself by the expectation of UFTBC for my life to bring glory and honor to the Lord, Jesus Christ.

I have read the statement of faith of Unity Faith & Truth Bible College and agree to follow its doctrinal stand by the Word of God.

Signature of Applicant: Date:

GOWN SIZE

PLEASE CHOOSE AN OPTION IN BOTH HEIGHT AND WEIGHT!!!

Height: Weight:

Campus: UFTBC

PAYMENTS CAN BE MADE VIA CASH APP TO

\$UFTBC

Name:

Degree Level:

Major:

Print this form, scan and email it to info@uftbc.org
Also, include a clear photo of yourself along with
your completed application. You can also mail your completed application
to:

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