



STUDENT APPLICATION

**World Changers Bible Institute and Seminary (WCBIS)
(A Ministry Training Center)**

**Please fill out this form and mail it along with your \$50.00 registration fee to:
World Changers Bible Institute
511 Industrial Mile Rd.
Columbus, Ohio 43228
President of School: Dr. J. Mike Hensley ThD.
wcbis1@gmail.com**

Make sure all forms are sent back to school at the same time:

Main Information:

Name: _____ **SSN:** ____ - ____ - _____

Date of Birth: _____

Address: _____

Sex: M____ F____

City: _____ **State:** _____

Zip: _____

Phone: (day) (____) _____

(Evening) (____) _____

Cell phone: _____

Fax #: (____) _____

Email: _____

Degree Desired:

____ **Certificate of Biblical Studies**

30 Credits needed

____ **Advanced Ministry Diploma**

90 Credits needed

____ **Associate of Biblical Studies:**

60 Credits needed.

____ **Bachelor of Theology**

120 Credits needed

Transfer of credits? Yes or N

General Information:

____ **Single** ____ **Married** ____ **Divorced** ____ **Widowed**

Military Service ____ **Yes** ____ **No**

Active Reserve ____ **Yes** ____ **No**

Serve in a church position: ____ **Yes** ____ **No** **Position:** _____

How long: _____

Name and address of Church you attend: _____

Pastor's Name: _____ **Phone#:** _____

Academic History:

High School: _____

Location: _____

Graduation Date: _____

College or Bible Institute: _____

Degree: _____

Location: _____

Graduation Date: _____

Post Graduate or Trade school: _____

Degree: _____

Location: _____

Graduation Date: _____

Major: _____ **Minor:** _____

Academic Achievements / Honors:

(Attach Extra Sheets if Needed)

Place of Birth: _____ **Date of Birth:** _____ **M** _____ **F** _____
____ **Single** ____ **Married** ____ **Divorced** ____ **Widowed**

Ethnic Origin: ____ **Native Alaskan or Native American** ____ **Asian or Pacific Islander**
____ **Hispanic** ____ **Black, Non-Hispanic** ____ **White, Non-Hispanic** ____

References:

Please list the names, addresses, and phone numbers of at least three references. One must be from your local church. The other two can be from your workplace or friends.

Name: _____ **Address:** _____

City: _____ **State:** _____

Zip Code: _____

Telephone #: (____) _____

Name: _____ **Address:** _____

City: _____ **State:** _____

Zip Code: _____

Telephone #: (____) _____

Name: _____ **Address:** _____

City: _____ **State:** _____ **Zip Code:** _____

Telephone #: (____) _____

Will you be attempting to transfer credits from another institution?

___Yes* ___No

***If yes, you must have an official transcript sent to us directly from the institution you wish to transfer credits from.**

I give World Changers Institute permission to contact any references listed in this application. I have also read the statement of faith and the code of conduct in the WCBIS handbook and agree to abide by both.

Date: _____

Signature of Student: _____

- **Please include your nonrefundable \$50.00 registration fee.**
- **Please include your testimony of how you came to know the Lord and your future ministry goals on a separate sheet.**
- **Also include a 3x5 picture of yourself.**
- **Give your Pastor the Pastor's Recommendation form and have them Fill it out and send back to the school.**
- **If you plan to transfer credits from a former college or training program you will need to contact your former college(s) and have them mail official copies of your transcripts for transfer evaluation.**

**WORLD CHANGERS BIBLE INSTITUTE AND SEMINARY
511 Industrial Mile Rd. Columbus, Ohio 43228
Attention: President Dr. J. Mike Hensley ThD.
wcbis1@gmail.com
614-859-6264**