



International Student Application

Date _____ Semester you wish to enter VBC _____ Fall _____ Spring 20 _____

Last Name _____ First Name _____ Middle or Maiden Name _____

Mailing Address _____

City _____ State _____ Zip _____

Home Phone (_____) _____ Work Phone (_____) _____

Email Address (PRINT CLEARLY) _____

Place of Birth: City _____ State _____

Date of Birth: _____ Social Security Number: _____

Marital Status: Single Married Widowed Divorced Other

Name of Spouse: _____

If married, give the name and ages of children:

Name _____ Age _____

Name _____ Age _____

Name _____ Age _____

Will your spouse and/or child/children be accompanying you to the United States? Yes No

How did you hear about VBC? _____

Emergency Contact First Name _____ Last Name _____

Emergency Phone Number (_____) _____ Email _____

Name of Father/Guardian _____ Occupation _____

Number and Street _____

City _____ State _____

Region _____ Zip Code _____

Country _____ Phone _____

Present Occupation: _____ Employer: _____

Address: _____

Church Membership: _____

Pastor's Name/Address: _____

Denomination or Mission Board _____

What do you plan to do after you graduate? _____

How long have you been saved? _____ Is your spouse saved? Yes No

Is your spouse in complete agreement with you attending VBC? Yes No

Are you an active worker in your home church? Yes No

In what capacity(s) have you served?: _____

Do you have prior military service: Yes No Branch of military service: _____

Dates of service: From _____ To _____

Give three names with complete addresses and phone numbers for each reference:

Pastor _____

Teacher or Employer _____

Friend _____

Citizenship

Country of Birth: _____

Are you a citizen of the United States? Yes No (If no, answer the questions below.)

Of what country are you a citizen? _____

Are you a permanent U.S. resident? Yes No

Alien Registration Number: _____

Do you presently have a U.S. Visa? Yes No

If yes, what type: _____ Expiration Date: _____

Languages you speak: First: _____ Second: _____ Third: _____

Race: Black _____ Asian or Pacific Islander _____ Hispanic _____ White _____ Other _____

Are you currently employed? Yes No

Do you have personal funds for your study program in the United States? Yes No If yes, how much _____

If yes, the "Affidavit of Support" form would not be necessary. Instead include a notarized personal bank statement with this application. If no, you must have a sponsor who will guarantee your support. The U.S. Immigration and Customs Enforcement requires this.

How much funding from other sources or a sponsor will you have available for your study program in the United States? _____

How much in monthly living expenses do you anticipate? _____

Have you been to the United States before? Yes No If yes, dates _____

What type of Visa were you granted? _____ Expiration Date _____

Type of U.S. Visa Expected _____ Dates _____

Educational Information

_____/_____/_____/_____
 Name of High School City/County State Date of Graduation

If you did not graduate, have you obtained a G.E.D.? Yes No Date: _____

Have you previously attended VBC? Yes No Date(s): _____

Have you taken the TOEFL test? Yes No Your score _____

If yes, have you already requested that a copy be sent to VBC Yes No

Have you ever been denied enrollment at any college Yes No

Were you ever suspended or expelled by any school? Yes No

If yes, please explain on a separate sheet of paper.

List all colleges attended in chronological order. Failure to report all colleges attended may prevent a transfer of credits. Attach additional sheets if necessary.

Name of Institution: _____
 City: _____ State: _____ Dates attended: From _____ To _____
 Degree(s) received: _____ Credits Earned: _____ Sem. Qtr.

Name of Institution: _____
 City: _____ State: _____ Dates attended: From _____ To _____
 Degree(s) received: _____ Credits Earned: _____ Sem. Qtr.

Are you currently enrolled in the last institution attended? Yes No

If so, what will be your last date of attendance? _____

Have you ever been convicted for the violation of any Federal, State, County, or Municipality Law? Yes No

If yes, give full details on a separate sheet and attach to this form.

What City, County, or Institutional Library can you use for research and reference materials?

 (This cannot be your personal library.)

Degree Plan

___ Bible Certificate Program

___ Associate's Program

___ Bible

___ Christian Education

___ Pastoral Studies

___ Elementary Education

___ Early Childhood Education

Bachelor's Program

___ Bible: Minor: _____

___ Christian Education

___ Pastoral Studies

___ Elementary Education

___ Secretarial Science

Refund Policy

The \$25 Application Fee is non-refundable. If the student chooses to withdraw before classes begin they will be charged a \$30 administrative fee.

Following the beginning of classes, adjustments will be made to a student's balance according to the catalog and is based on the date the withdrawal form is filed with the registrar's office. A \$30 administrative fee will be deducted from the final refund total.

Important: No refunds are made if a student withdraws from classes after the drop/add period.

Policy and Doctrinal Statement

I agree to abide by the college regulations and policies as set forth in the catalog. Also, by the signing of this application I certify that I have read, understand, and respect the doctrinal statements as presented in the college catalog.

Signature

Date

Final Approval

Do not sign in this section until you have received your evaluation assessment.

Student's Signature

School Official's Signature

Date

Date

Please ensure the following items are included with the application:

- l \$25 Application Fee
- l Completed Application Form
- l Salvation Experience
- l Recent Photograph
- l Notarized Bank Statement
- l Affidavit of Support
- l TOEFL scores if from a non-English speaking country

