BETHEL CHRISTIAN UNIVERSITY

P. O. BOX 4086, TOPEKA KS. 66604 USA. TEL: 1 (785) 430-4422 – E-mail: <u>info@bcuks.org</u>

(All correspondence by E-mail OR Postal address only)
Fill out this FORM <u>ONLINE</u>, SIGN and SUBMIT or PRINT, SCAN, and E-mail it to the University.

APPLICANT'S AUTOBIOGRAPHICAL SKETCH

NAN	ME OF APPLICANT:
ADI	DRESS:
TEL	EPHONE:E-MAIL:
1.	Relate briefly your home life (please include interpersonal relationships, your feeling toward authority and Family discipline, Family worship and attitude, Christian living and Service).
2.	Summarize your school experience (Academic and Extra-Curricular Activities).
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3.	Relate your salvation experience and your Spiritual growth since conversion.
4.	Summarize your understanding of an involvement in private Bible Study, Prayer, Witness and Fellowship.
5.	Summarize your Christian Services / Activities.
6.	State your convictions toward and participation in recreation and amusements, such as theater attendance and dancing.
7.	State your use of tobacco, alcohol and drugs. If used, say if practice has been discontinued, and for how long. If drugs were used, say types of drugs.
8.	Give your reason(s) for wanting to attend or study with Bethel Christian University.

Do you have the finances for the first Semester? Please explain in detail. IEFLY WRITE YOUR FUNDAMENTAL BELIEF ABOUT CHRIST: SALVATION: DEDENIE ANCIE:		you faithful to your financial obligations?
Please explain in detail. EFLY WRITE YOUR FUNDAMENTAL BELIEF ABOUT CHRIST: SALVATION: REPENTANCE: WATER BAPTISM: HOLY GHOST BAPTISM:		
CHRIST:	_	
REPENTANCE:		
WATER BAPTISM:	SAL	
HOLY GHOST BAPTISM:	REP	PENTANCE: CHR
VIVERS	WA'	TER BAPTISM:
TE A BRIEF HISTORY OF YOUR CONVERSION AND CALL	HOI	LY GHOST BAPTISM:
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