

BETHEL CHRISTIAN UNIVERSITY

P. O. BOX 4086, TOPEKA KS. 66604 USA.
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(All correspondence by E-mail OR Postal address only)
Fill out this FORM ONLINE, SIGN and SUBMIT or PRINT, SCAN, and E-mail it to the University.

APPLICANT'S AUTOBIOGRAPHICAL SKETCH

NAME OF APPLICANT: _____

ADDRESS: _____

TELEPHONE: _____ 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). _____

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. _____
