



**GLOBAL  
UNIVERSITY**

**UNDERGRADUATE SCHOOL OF BIBLE AND THEOLOGY**

1211 S. Glenstone Avenue, Springfield, MO 65804 USA

Telephone: 1-800-443-1083 USA; 417-862-9533 Outside USA • Fax: 417-862-0863 • Email: [studentservices@globaluniversity.edu](mailto:studentservices@globaluniversity.edu)

**Undergraduate Application (International - RWANDA)**

**RETURN APPLICATION TO KIGALI NETWORK OFFICE**

Please clearly print or type your information. Both the student and GU network representative need to sign this form.

**Student Information**

Status: ☐ New applicant ☐ Reactivating student

☐ I have previously enrolled as a BSB student.

☐ I have previously studied with another Global University network office.

Former student number: \_\_\_\_\_

Former enrollment office: \_\_\_\_\_

Student Name: \_\_\_\_\_

*Last/Family*

*First/Given*

*Middle*

*Maiden*

Address: \_\_\_\_\_

*City*

*Country*

Primary Phone: \_\_\_\_\_

Other Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ ☐ Male  
DD MM YYYY ☐ Female

Title: ☐ Mr. ☐ Mrs. ☐ Ms. ☐ Rev. ☐ Dr.

Marital Status: ☐ Single ☐ Married ☐ Widowed ☐ Divorced

Country of Citizenship: \_\_\_\_\_

Primary Language: \_\_\_\_\_

Language of Study: \_\_\_\_\_

**Primary Religious Affiliation**

☐ Assemblies of God ☐ Other Pentecostal

☐ Protestant ☐ Roman Catholic

☐ Other (specify): \_\_\_\_\_

**Academic Information**

Highest Education Completed (e.g., secondary/high school, post-secondary): \_\_\_\_\_

List any post-secondary institutions you have attended (e.g., trade school, Bible college, university):

Institution	Dates Attended	Major	Certificate / Diploma / Degree	Sending Official* Transcript
_____	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No

\*Official indicates a transcript that is sent by the school or institution directly to Global University.

**Required Documentation: A copy of your high school transcript or equivalent proof of graduation must be submitted.**

**Ministry Affiliation**

I have ministerial credentials with:

☐ The Assemblies of God

☐ Other (please specify): \_\_\_\_\_

Country: \_\_\_\_\_

District: \_\_\_\_\_

Level of credential: \_\_\_\_\_

Date Obtained: \_\_\_\_/\_\_\_\_/\_\_\_\_  
DD MM YYYY

## Programs of Study

Mark the program of study for which you are applying. (Choose only one)

- ☐ Not enrolling in a program (*completing GU courses to transfer to another school*)
- ☐ Undeclared / Enrichment (*not pursuing a certificate, diploma, or degree; enrolling in courses for enrichment purposes*)
- ☐ Undeclared / Undecided (*will choose a program of study before completing 18 credits*)
- ☐ Undeclared—Concurrent / Dual-Enrolled High School Student (*complete U-18 student application form*)

<i>Certificates</i>	<i>Credits</i>	<i>Bachelor of Arts Degrees</i>	<i>Credits</i>
<input type="checkbox"/> Bible Interpreter Certificate	15	<input type="checkbox"/> Bachelor of Arts in Bible and Theology	120
<input type="checkbox"/> Christian Communicator Certificate	15	<input type="radio"/> With minor*	
<input type="checkbox"/> Christian Mission Certificate	15	<input type="radio"/> Without minor	
<input type="checkbox"/> General Studies Certificate	15	<input type="checkbox"/> Bachelor of Arts in Christian Education	120
<input type="checkbox"/> Certificate in Pastoral Counseling	18	<input type="radio"/> With minor*	
<input type="checkbox"/> Certificate in Bible and Theology	30	<input type="radio"/> Without minor	
<i>Associate of Arts Degrees</i>	<i>Credits</i>	<input type="checkbox"/> Bachelor of Arts in Intercultural Studies	120
<input type="checkbox"/> Associate of Arts in Bible and Theology	60	<input type="radio"/> With minor*	
<input type="checkbox"/> Associate of Arts in Christian Education	60	<input type="radio"/> Without minor	
<i>Diplomas</i>	<i>Credits</i>	* The 15-credit Pastoral Counseling minor may count as part of the program's elective credits. Students who earned the Pastoral Counseling Certificate are not eligible for the minor program.  I have already earned a bachelor's degree or equivalent from another university (60 credits of advanced standing will be granted).  <i>In order to qualify for advanced standing, you must request an official transcript be sent to Global University from the university that awarded your first bachelor's degree.</i>	
<input type="checkbox"/> Diploma in Ministry	60		
<input type="checkbox"/> Diploma in Bible and Theology	90		

☐ Specialized Degree for Non-USA Students

\_\_\_\_\_  
*Program Name*

How did you hear about Global University? \_\_\_\_\_

- ☐ I agree to the regulations governing the study program set forth by the Global University catalog in effect during the year in which I am applying.

☐ I understand I must maintain a GPA of 2.00 in order to be permitted to continue my undergraduate studies and complete my study program.

☐ I understand it is my responsibility to verify the applicability of Global University's credits toward my educational goals and completion of this study program does not guarantee my acceptance for any position by any church or organization.

☐ I understand I am responsible for all shipping / duty fees for materials shipped if I reside outside the USA.

☐ My application fee is included with this form (refer to fee schedule).  
The application fee is non-refundable five business days after this form is received by Global University.

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
          DD      MM      YYYY

Print Full Name: \_\_\_\_\_

\_\_\_\_\_  
*Applicant's Signature*

\_\_\_\_\_  
*Parental / Guardian Signature (for applicants under 18 years)*

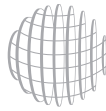
### FOR OFFICE USE ONLY

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ *I recommend this student for the program he or she has indicated.*  
          DD      MM      YYYY

GU Network Office Code: \_\_\_\_\_ GU Representative's Signature: \_\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ *I recommend this student for the program he or she has indicated.*  
          DD      MM      YYYY

Global University Registrar's Signature: \_\_\_\_\_



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## Permission to Release Records (International)

This authorization is required for all students who desire to be represented by a GU network office or other persons. Submit this signed form by scanned email attachment to Global University International Student Services at [studentservices@globaluniversity.edu](mailto:studentservices@globaluniversity.edu) or if email is unavailable, mail to the address above.

Please clearly print all information.

Student ID: \_\_\_\_\_

Date of birth: \_\_\_\_\_  
DD/MM/YYYY

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

Name: \_\_\_\_\_

*Last/Family*

*First/Given*

*Middle*

Address: \_\_\_\_\_

*City*

*State/Province*

*Postal code*

*Country*

I authorize Global University to release all academic and financial records to and give authorization for my subjects to be ordered by the following (select all that apply):

☐ Specified individual (spouse, parent, chaplain, pastor, etc.)

Name of individual: \_\_\_\_\_

Relationship to student: \_\_\_\_\_

☐ GU Network Office

\_\_\_\_\_  
*Name of GU network office*

\_\_\_\_\_  
*GU network office code*

\_\_\_\_\_  
*GU network office email address*

This authorization is in effect until such a time that I contact Global University in Springfield, Missouri, and withdraw my authorization in writing. I have read and understand Global University's cancellation and refund policy as it pertains to the specific level of courses (BSB, undergraduate, or graduate) that are being ordered.

Student signature: \_\_\_\_\_

Date: \_\_\_\_\_

*DD/MM/YYYY*