

Metro East Bible College and Seminary - Admission Application Form

Personal Information

- **Full Name:** _____
 - **Date of Birth (MM/DD/YYYY):** _____
 - **Gender:** ☐ Male ☐ Female
 - **Marital Status:** ☐ Single ☐ Married ☐ Divorced ☐ Widowed
 - **Home Address:** _____
 - **City:** _____ **State:** _____ **ZIP Code:** _____
 - **Country:** _____
 - **Phone Number:** _____
 - **Email Address:** _____
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Program of Interest

- ☐ Associate of Biblical Studies
 - ☐ Bachelor of Theology
 - ☐ Master of Theology
 - ☐ Doctor of Pastoral Theology
 - ☐ Other: _____
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Academic Information

- **Highest Degree Earned:** _____
- **Name of Last Attended Institution:** _____



- **Graduation Year:** _____
 - **GPA:** _____
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Church and Ministry Experience

- **Church Name:** _____
 - **Denomination:** _____
 - **Position/Title (if any):** _____
 - **Years of Ministry Experience:** _____
 - **Describe Your Ministry Involvement:** _____
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References

Provide at least two references (one pastoral reference is required):

1. **Name:** _____
 - **Phone Number:** _____
 - **Relationship to You:** _____
 2. **Name:** _____
 - **Phone Number:** _____
 - **Relationship to You:** _____
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Personal Statement

Please attach a 1-2 page personal statement explaining why you wish to attend **Metro East Bible College and Seminary**, your calling to ministry, and your goals for the future.



Application Fee

- A non-refundable application fee of **\$50** must accompany this application.
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Declaration

By signing below, I affirm that the information provided on this form is true and complete to the best of my knowledge. I understand that any falsification or misrepresentation may result in dismissal from the Seminary.

- **Signature:** _____
 - **Date:** _____
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Office Use Only

- **Application Received Date:** _____
- **Reviewed by:** _____
- **Decision:** ☐ Accepted ☐ Rejected
- **Date of Decision:** _____

Email this form to: metroeastseminary@gmail.com

