## LIFELINE BIBLE COLLEGE

Semester.	fear	<del></del>		
Student Enrollment Forr	n			
If you need help completing this form, in	cluding translation services	s. please contact your school.		
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Section 1 Student Details	•			
Surname:	,			
Legal surname on birth certificate:				
(if different from above)				
Previous surname: (if applicable)				
1st name: (given name)				
Preferred first name:				
Has the student been known by any other names? (if not listed above)	Other surname/s:	Other first name/s:		
Date of birth:				
Sex:	Male Female	Male Female		
Ethnicity:				
Student's residential address:				
City:		Postcode:		
Section 2 Previous Educ	ation			
Institution Type:				
Name:				
Dates Attended				
Degree Attempted				
Degree Status *Choose one	Date Completed:	Currently Attempting		
PLEASE INCLUDE TRANSCRIPTS OF ALL PR	REVIOUS COURSE WORK			

Section 2	Previous Education			
Institution Type:				
Name:				
Dates Attended				
Degree Attempted				
Degree Status *Choose one		Date Completed:	Currently Attempting	
PLEASE INCLUDE TRANSCRIPTS OF ALL PREVIOUS COURSE WORK				

**Parent/Guardian Information** 

Section 3

Email:

Postcode:

Postcode:

Postal address: (if different from above)

Residential address:

Suburb/town/community:

Suburb/town/community:

## If you are an independent student (living without a parent or guardian) please skip this section Parent/guardian 1 Parent/guardian 2 Title: (Mr/Ms/Mrs/Miss) Surname: First name: Middle name: Relationship to student: (e.g., father, grandmother) Responsible for parenting\* Yes Yes No No Lives with student\* Yes No Yes No Receive reports etc.\* Yes No Yes No Yes Yes Contact this person in No No (If all the No boxes above are ticked, an emergency? \* please ensure Section 3 is completed.) Home phone: Other phone: Mobile:

Section 4 Degre	ee of Interest			
The information requested	in this section is to better	serve your goals in furthe	ering your education.	
Please choose an option fr	om below to identify			
which degree field you are	interested enrolling?			
Associate of Scien	ce	Bachelor of So	cience	
<ul> <li>A.A.S. Degree Biblical Ethics in Business</li> <li>A.A.S Degree in Youth Ministry</li> <li>A.A.S Degree in Investigative Biblical Research</li> <li>A.A.S Degree in Christian Counseling</li> <li>A.A.S Degree in Performing Arts Ministry</li> <li>A.A.S Degree in Social Work/ Evangelism</li> </ul>		<ul> <li>B.S. Degree Biblical Ethics in Business</li> <li>B.S. Degree in Youth Ministry</li> <li>B.S Degree in Investigative Biblical Research</li> <li>B.S. Degree in Christian Counseling</li> <li>B.S. Degree in Preforming Arts</li> <li>B.S. Degree in Social Work/ Evangelism</li> </ul>		
Masters		PH. D		
<ul> <li>M.A. Degree Biblical Ethics in Business</li> <li>M.A. Degree in Youth Ministry in Leadership</li> <li>M.A. Degree in Investigative Biblical Research</li> <li>M.A. Degree in Christian Counseling</li> </ul>		Coming soon Speak with counselor on possible degrees.		
Section 5 Emerge For an emergency where the contacts. For independent	ne parent/guardian/career students this is the first po	int of contact in an emer	gency.	
Title: (NA-/NA-/NA/NA:)	Co	ontact 1	Contact 2	
Title: (Mr/Ms/Mrs/Miss)  Name:				
Relationship: (e.g., aunt, friend	1)			
Phone 1:	-7			
Phone 2:				
t is your responsibility to on this enrolment form.	notify the school in writi	ng of any changes to tl	ne information provided	
Signature:		_ Date: / /		
Name of school witness: Please print)				
Signature:		_ Date: / /		