Southern Indiana Baptist College Application for Enrollment

Name			Date	
City	State	Zip	Date of Birth	
Phone	cell		e-mail	
Home Church				
Church Address				
	·		Phone	
Please list any Bible tra a copy of the transcript			hat you have received along with d.	
Name of School				
School Address				
		Number Credit Hours Completed		
Which degree are you	pursuing at this tim	e?		
Courses come in CD fo	ormat.			
Please <u>PRINT</u> your na	me the way you wi	sh it to appea	ır on your diploma:	
Please briefly describe	your salvation expe	-		
A non-refundable \$100 month's tuition of \$50			o be submitted along with your first	
How did you hear about	ut our college?			