



BOSTON BAPTIST COLLEGE

Application for Admission

Application Information

MR. MRS. MISS

First Name: _____ Last Name: _____

Middle Name: _____ Preferred Name: _____

I plan to enroll: FALL 20____ SPRING 20____ SUMMER 20____

I plan to attend: PART-TIME (11 CREDITS OR LESS) FULL-TIME (12+ CREDITS)

Please select the program for which you are applying:

- BACHELOR OF
BIBLICAL STUDIES (BBS)
- ASSOCIATE IN SCIENCE IN
BIBLICAL STUDIES
- UNDECIDED

BBS ONLY

Please select a minor:

- BIBLICAL COUNSELING MUSIC
- BUSINESS PASTORAL
MINISTRIES
- CROSS-CULTURAL
MINISTRIES YOUTH MINISTRIES
- CHURCH MINISTRIES UNDECIDED
- EDUCATION
- HISTORY

Please select your expected living situation: ON CAMPUS OFF CAMPUS UNDECIDED

Please list all other college/universities to which you are applying:

Personal Information

Street Address: _____

City/State/Zipcode: _____

Social Security Number (SSN): _____ - _____ - _____ Date of Birth: ____ / ____ / ____

Phone Number: _____ Email: _____

Are you a U.S. Citizen? YES NO If no, please list citizenship: _____

If you are **not** a U.S. Citizen, please indicate your current visa status:

VISITOR F-1 STUDENT PERMANENT RESIDENT OTHER: _____

Please select your marital status: SINGLE ENGAGED MARRIED DIVORCED
 DIVORCED & REMARRIED SEPARATED

Maiden Name (if applicable): _____

Name of Spouse (if applicable): _____

Ethnicity: HISPANIC/LATINO ASIAN/PACIFIC ISLANDER BLACK/AFRICAN AMERICAN
 AMERICAN INDIAN/ALASKAN WHITE/CAUCASIAN OTHER

THE QUESTION OF ETHNICITY IS REQUESTED BY THE U.S. DEPARTMENT OF EDUCATION.
THIS INFORMATION WILL NOT BE USED TO DETERMINE APPLICANT'S ELIGIBILITY FOR ADMISSION.

**BOSTON BAPTIST COLLEGE DOES NOT DISCRIMINATE ON THE BASIS OF AGE, GENDER, RACE,
DISABILITY, OR NATIONAL ORIGIN IN THE ADMINISTRATION OF ITS POLICIES.**

Family Information

Name of Father/Guardian: _____ ADDRESS IS SAME AS ABOVE

Address (if different): _____

City/State/Zipcode (if different): _____

Phone Number: _____ Email: _____

Occupation (if applicable): _____

Current Church (if applicable): _____

Name of Mother/Guardian: _____ ADDRESS IS SAME AS ABOVE

Address (if different): _____

City/State/Zipcode (if different): _____

Phone Number: _____ Email: _____

Occupation (if applicable): _____

Current Church (if applicable): _____

Name of Sibling (if applicable): _____ Est. Grad Year: _____

Name of Sibling (if applicable): _____ Est. Grad Year: _____

Name of Sibling (if applicable): _____ Est. Grad Year: _____

Name of Sibling (if applicable): _____ Est. Grad Year: _____

Please list any family members that have attended Boston Baptist College:

Church Information

Name of Church you are a member of: _____

Church Address: _____

City/State/Zipcode: _____

Do you attend regularly? YES NO Phone Number: _____

Name of Senior Pastor: _____



Educational Information

High School: _____ Grad Year: _____

City/State/Zipcode: _____

Please indicate your school type:

PRIVATE SCHOOL PUBLIC SCHOOL HOMESCHOOL GED

Please indicate if you have completed any of the following:

AP COURSES CLEP EXAM OTHER TRANSFERABLE CREDITS

If you have completed any of the options above, please explain:

Have you ever been expelled or suspended: YES NO

If yes, please explain:

Transferring Information

Please list all previous institutions you have attended in chronological order:

| <u>NAME OF INSTITUTION</u> | <u>CITY/STATE</u> | <u>DATES ATTENDED</u> | <u>CREDITS EARNED</u> |
|----------------------------|-------------------|-----------------------|-----------------------|
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

PLEASE NOTE: IT IS THE RESPONSIBILITY OF THE APPLICANT TO HAVE OFFICIAL TRANSCRIPTS FROM HIGH SCHOOLS AND COLLEGES ATTENDED FORWARDED DIRECTLY FROM THOSE INSTITUTIONS TO BOSTON BAPTIST COLLEGE BEFORE HE/SHE CAN BE FORMALLY ADMITTED

Are you on academic or disciplinary probation at any institution? YES NO

If yes, please explain:

Are you ineligible to return to any institution you have previously attended?

YES NO

If yes, please explain:

Legal Information

Please indicate if you use or consume any of the following items:

TOBACCO PRODUCTS ALCOHOLIC BEVERAGES ILLEGAL DRUGS MARIJUANA/CANNABIS
(MEDICAL OR RECREATIONAL)

Do you have a criminal record and/or been under the supervision of a prole officer,
juvenile court, or other legal body? YES NO

If yes, please explain:

I understand Boston Baptist College will seek an appropriate recommendation from the Pastor listed in the "Church Information" section of this application. I willingly waive my right to see that recommendation, although I understand that such a waiver is not required for admission.

APPLICANT'S SIGNATURE

____/____/____
DATE

Personal Profile

Have you personally accepted Jesus Christ as your Savior? YES NO

If yes, when? _____

Give a brief testimony of your salvation: _____

Give a brief explanation of your involvement in Christian Ministry: _____

How does your life demonstrate a desire for personal spiritual growth?

Why do you want to attend Boston Baptist College?

What are some of your career objectives and goals?

Survey

Is there a current student, staff, or faculty member at Boston Baptist College who influenced your decision to apply? YES NO

If yes, who? _____

Please select up to 5 factors that influenced your decision to consider Boston Baptist College?

- | | |
|--|--|
| <input type="checkbox"/> ACADEMIC EXCELLENCE | <input type="checkbox"/> PASTOR |
| <input type="checkbox"/> AVAILABILITY OF FINANCIAL AID | <input type="checkbox"/> PRIVATE COLLEGE |
| <input type="checkbox"/> CHRISTIAN SCHOOL TEACHER | <input type="checkbox"/> PROFESSOR OR COLLEGE REPRESENTATIVE |
| <input type="checkbox"/> COLLEGE DAYS (REV DAYS) | <input type="checkbox"/> PROMOTIONAL MATERIAL |
| <input type="checkbox"/> COLLEGE RECRUITING TEAM | <input type="checkbox"/> COLLEGE'S REPUTATION |
| <input type="checkbox"/> CURRENT STUDENT | <input type="checkbox"/> STUDY TRIP PROGRAM |
| <input type="checkbox"/> DOCTRINAL STANCES | <input type="checkbox"/> YOUTH CAMP/CONFERENCE |
| <input type="checkbox"/> FORMER STUDENT (ALUMNI) | <input type="checkbox"/> YOUTH PASTOR |
| <input type="checkbox"/> GEOGRAPHICAL LOCATION | <input type="checkbox"/> WEBSITE |
| <input type="checkbox"/> LOW COST | <input type="checkbox"/> OTHER: |
| <input type="checkbox"/> PARENT'S ALMA MATER | _____ |



Financial Information

How do you plan to finance your education?

*NOTE: FAFSA APPLICATIONS MUST BE COMPLETED PRIOR TO YOUR ARRIVAL ON CAMPUS.
FINANCIAL AID GUIDANCE CAN BE FOUND AT WWW.BOSTON.EDU/FINANCIALAID.*

Do you plan to seek employment while attending Boston Baptist College?

YES, FULL-TIME YES, PART-TIME NO

Please describe any major financial obligations you expect to manage while attending Boston Baptist College: _____

Are you eligible for V.A. benefits? YES, BRANCH OF SERVICE: _____ NO

I understand it is a privilege, not a right, to attend Boston Baptist College and intend to regard my attendance as such. During the tenure of my relationship with the institution, I agree to live and behave in a manner that is in harmony with the Boston Baptist College Community Covenant and Doctrinal Statement. I will conduct myself in a manner consistent with the moral, ethical, and spiritual standards of Biblical Christianity as set forth in the Scriptures. I am willing to abide by the rules and regulations of Boston Baptist College as presented in the Student Handbook and to function in spiritual cooperation with the entirety of my college community. As part of my agreement to enroll at Boston Baptist College, I will, for the entirety of my enrollment, maintain a faithful and committed relationship with a local church that operates in harmony with the Doctrinal Statement of Boston Baptist College. If at any point, I should no longer concur with the stated regulations and/or doctrinal position of Boston Baptist College, I agree to amiably withdraw my affiliation with Boston Baptist College. I verify, to the best of my knowledge, that all information provided in this application is accurate and complete.

APPLICANT'S SIGNATURE

DATE

In addition to this application, the following items must be submitted to complete the admissions process:

- APPLICATION FEE (\$50.00)
- STUDENT MEDICAL EXAMINATION RECORD FORM
- PASTOR'S RECOMMENDATION FORM
- OFFICIAL HIGH SCHOOL TRANSCRIPT (OR GED)
- ACT/SAT COLLEGE REPORT (ACT CODE: 2680 | SAT CODE: 4323)
- ALL PREVIOUS COLLEGE TRANSCRIPTS (IF APPLICABLE)
- COMPLETED FAFSA (OPEID: 03248200)



Application Fee

To pay your Application Fee of \$50.00, you may use one of the two following methods:

- (1.) ENCLOSE YOUR APPLICATION FEE OF \$50.00 IN A SEALED ENVELOPE AND MAIL TO:
OFFICE OF ADMISSIONS
BOSTON BAPTIST COLLEGE
950 METROPOLITAN AVENUE
HYDE PARK, MA 02136-4030
- (2.) PAY OUR APPLICATION FEE OF \$50.00 AT WWW.BOSTON.EDU/WEBSERVICES

Applications will only begin being processed once the corresponding Application Fee has been paid in full.

Please contact the Admissions & Recruitment Office with any questions or concerns regarding your Application or Application Fee by calling (617) 364-3510 (ext. 233) or by emailing admissions@boston.edu

You will be notified in writing regarding your admissions status once your Application for Admission has been received, your Application Fee has been paid in full, and the evaluation process has been completed by the Boston Baptist College Admissions Committee.

Boston Baptist College does not discriminate on the basis of age, gender, race, disability, or national origin in the administration of its policies.

COLLEGE USE ONLY

| | | |
|-----------|------------|--------|
| DATE RCD: | HS TRANS: | ACT/M: |
| APP FEE: | COL TRANS: | ACT/V: |
| MED REC: | CONF EP: | SAT/M: |
| IMMUN: | FAFSA: | SAT/V: |
| PAS REC: | ACCEPT: | |



Your Future Starts Here
BOSTON.EDU

