

**OVAL BIBLE COLLEGE
APPLICATION FOR ENROLLMENT**

**P.O. BOX 466046
Lawrenceville, GA 30042
E-mail Address: timmytezeno@ovalbiblecollege.com
Web Address: www.ovalbiblecollege.com**

Please Type or Print

Name (First, Middle Initial, Last)	Address	Home Phone	
		Business Phone	
E-mail Address	Date of Birth	Sex	Race

Please list all Colleges, Seminaries, and Universities attended.

Degree Earned	Name of School	Location of School (City, State)	Hours Completed	Date Attended

Please indicate below the program for which you are applying.

<input type="checkbox"/> Associate Degree of Theology <input type="checkbox"/> Bachelor Degree of Theology <input type="checkbox"/> Master Degree of Theology <input type="checkbox"/> Master of Biblical Counseling <input type="checkbox"/> Doctor of Biblical Counseling <input type="checkbox"/> Bachelor of Biblical Counseling <input type="checkbox"/> Bachelor of Religious Education <input type="checkbox"/> Theology <input type="checkbox"/> Bachelor of Theology <input type="checkbox"/> Master of Theology <input type="checkbox"/> Doctor of Theology <input type="checkbox"/> Bachelor of Divinity <input type="checkbox"/> Master of Divinity <input type="checkbox"/> Doctor of Divinity <input type="checkbox"/> Bachelor of Ministry <input type="checkbox"/> Master of Ministry <input type="checkbox"/> Doctor of Ministry <input type="checkbox"/> Bachelor of Pastoral Ministry <input type="checkbox"/> Master of Pastoral Ministry <input type="checkbox"/> Doctor of Pastoral Ministry <input type="checkbox"/> Bachelor of Pastoral Leadership <input type="checkbox"/> Master of Pastoral Leadership <input type="checkbox"/> Doctor of Pastoral Leadership	<input type="checkbox"/> Master Degree of Biblical Studies <input type="checkbox"/> Doctor of Theology Degree <input type="checkbox"/> Doctor of Biblical Studies <input type="checkbox"/> Bachelor of Ministry <input type="checkbox"/> Bachelor of Divinity <input type="checkbox"/> Master of Religious Education <input type="checkbox"/> Bachelor of Biblical Studies <input type="checkbox"/> Family Ministry Certificate <input type="checkbox"/> Women In Ministry Certificate <input type="checkbox"/> Doctor of Pastoral Leadership	<input type="checkbox"/> Master of Ministry <input type="checkbox"/> Master of Divinity <input type="checkbox"/> Doctor of Ministry <input type="checkbox"/> Doctor of Divinity <input type="checkbox"/> Doctor of Religious Education <input type="checkbox"/> Certificate of Biblical Studies <input type="checkbox"/> Certificate of Biblical Counseling <input type="checkbox"/> Pastoral Ministry Certificate <input type="checkbox"/> Certificate in Youth Ministry
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*Please indicate your number of years served in the ministry. _____ Years.

*Have you received a High School Diploma or GED? ____Yes ____No

*How did you hear about us? __Radio __Magazine Ad __Search Engine

Applicant's Signature _____ Date _____

____ Enclosed is my \$200.00 enrollment fee

____ Enclosed is my \$300.00 Enrollment Fee for the Dual Degree Program

____ Enclosed is my \$300.00 Payment in full for the Degree Program

____ Enclosed is my \$500.00 Payment in full for the Dual Degree Program.

____ Enclosed is my \$99 enrollment fee for the Certificate Program.

____ Enclosed is my \$75 enrollment fee

Make checks or money orders payable to Oval Bible College