

Oneness Apostolic Bible Institute

Application for Admission

Office of Admissions  
125 East Third Street  
Mount Vernon, NY 10550  
(914) 663-8208

Name:

Last

First

Middle

If we will be receiving documents under any other name, please indicate below:

Name:

Last

First

Middle

Address:

Business Telephone: ( ) Home Telephone: ( )

Current Employer:

Address:

Church Affiliation: O.R.A.C (If not please list below) Date(s) Baptized: \_\_\_\_\_ Holy Ghost: \_\_\_\_\_

**Previous Denomination:** \_\_\_\_\_

Birth date: (optional) Sex: M F

Ethnicity: Black, non-Hispanic White, non-Hispanic Asian or Pacific Islander Hispanic  
American Indian Other

Please indicate the entry term for which you are applying:

Fall \_\_\_\_\_ Spring \_\_\_\_\_ Summer \_\_\_\_\_

Do you plan to study Full Time or Part Time ?

Plan of Study: Diploma in Biblical Theology Diploma in Practical Theology

Associates Degree in Theo-Centric Counseling Associates Degree in Divinity

Please list in chronological order all Colleges / Universities and High School Education.

High School	City / Country	Dates Attended	Major	Degree Awarded	Date or Expected Date of Graduation

Undergraduate	City/ Country	Dates Attended	Major	Degree Awarded	Date or Expected Date of Graduation
Graduate	City/ Country	Dates Attended	Major	Degree Awarded	Date or Expected Date of Graduation

Have you been placed on academic or disciplinary probation or been dismissed from any institution or church?  
 Yes No If Yes, please state briefly why: \_\_\_\_\_

Are you a citizen of the United States? Yes No  
 Are you a permanent resident of the United States? Yes No  
 If you are not a citizen or permanent resident, please complete the following:  
 Country of Birth \_\_\_\_\_ Country of Citizenship \_\_\_\_\_

**Please attach a resume, personal statement and recommendations as required for the completion of this application.**

To the best of my knowledge, the information contained in this application is accurate and complete. I understand that the \$35.00 application fee which I have enclosed is non-refundable and all documents submitted by me or on my behalf in support of my application becomes the permanent possession of the Oneness Apostolic Bible Institute also known as OABI and cannot be returned or photocopied for me or a third party.

I understand that my admission to OABI is a privilege and not a right, and I agree that admission, if granted, my registration and continuance on the rolls and graduation are subject to all policies, rules, regulations and procedures set forth by the current OABI manual. I also understand that these regulations may be amended at the discretion of the institute under circumstances deem sufficient by them. I further agree and authorize OABI to publish, for public relations purposes, any photographs in which I appear.

I further understand that ministerial licensure by any religious organization is not assured by my admission to, enrollment in, or graduation from the Oneness Apostolic Bible Institute.

Signature: \_\_\_\_\_ Print: \_\_\_\_\_ Date: \_\_\_\_\_

Oneness Apostolic Bible Institute  
Recommendation Form

To the applicant – Please complete the section below.

Applicant Name:

First

Middle

Last

Applicant Address:

Applicant Entry Term:            Fall \_\_\_\_\_ Spring \_\_\_\_\_ Summer \_\_\_\_\_

**To the Recommender – Please complete this form, and return it to the Director of Student Personnel / Admissions above. If you wish to use a letter or different format please feel free to do so. Thank you for your assistance.**

Name of Recommender:

(Please print)

Signature of Recommender: \_\_\_\_\_ Date: \_\_\_\_\_

Position or Title:

Address:

Telephone: \_\_\_\_\_ Name of Institution: \_\_\_\_\_

In what capacity have you known the applicant?

What is your overall recommendation?    Strongly recommend    Recommend

Recommend with some reservation    Do not recommend

(scale 1 – 10) 1 = Poor 10 = Excellent	Outstanding	Superior	Good	Fair	Poor	Not Applicable
Intellectual Ability						
Ability to work with Others						
Ability in Written Expression						
Ability in Oral Expression						
Maturity						
Initiative / Independence						
Creativity / Originality						



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Oneness Apostolic Bible Institute  
Personal Statement Form

To the applicant – Please complete the section below.

Applicant Name:		
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First	Middle	Last
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Applicant Address:

Applicant Entry Term:	Fall _____	Spring _____	Summer _____
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Write an essay no less than **250 words** on why you want to attend Bible School. How do you think you and your church will benefit from you pursuing this course of study? Give one specific example of an incident that happened in your life and how you could have handled it differently, if you had a more complete biblical knowledge. (Please use a separate sheet of paper if needed.)