2011-2012

SOFBC-CSCU

APPLICATION

☐ $100 Application fee

NAME:_____
LAST FIRST MIDDLE

ADDRESS:_____
STREET CITY STATE ZIP COUNTRY

PHONE:_____FAX:_____

EMAIL/WEBSITE:_____

DATE of BIRTH:_____GENDER: MALE/FEMALE_____

How did you hear about SOFBC-CSCU?_____

California State Christian University does not discriminate based on race, age, national origin, gender, veteran status or disabled condition.

PREVIOUS EDUCATION (list from most recent):
School Name / City & State/ Years attended / Degree & Major/ Did you graduate?

_____

_____

_____

PERSONAL REFERENCES (list 2 or 3): Name / Phone number / Email / Relationship

_____

_____

_____

PROFESSIONAL REFERENCES (list 2 or 3): Name / Phone number / Email / Relationship

_____

_____

_____

Doctrinal Beliefs: The mission of Shield of Faith Bible College/California State Christian University is to prepare men and women for ministry as godly servant-leaders in the body of Christ worldwide. We are seeking applicants who are passionately committed to our mission and will subscribe in good faith to the school's doctrinal beliefs. Do you adhere to the following doctrines?: The authority and inerrancy of the Scripture; the full deity and humanity of Christ; the spiritual lostness of the human race; the substitutionary atonement and bodily resurrection of Christ and the physical return of Christ. __Yes __No

I will be studying at:
- ○ Shield of Faith
- ○ CSCU Main Campus
- ○ Satellite Learning Center

_____
Signature / Date

Accepted SOF _____
Accepted CSCU _____