

***Grace and Peace
Institute of Biblical Studies***

ENROLLMENT APPLICATION

Name _____
Last First Middle

Address _____

Phone _____ Date of Birth _____

This Application is for the *(please check)*

1st semester _____; 2nd semester _____; 3rd semester _____;
4th semester _____; 5th semester _____; 6th semester _____.

What Bible schools have you previously attended, and where?

Present Church membership and Name of Pastor:

Do you tithe (10%) to The Church of Grace and Peace? Yes ___ No ___

Signature

Date

Enclose Registration with this application. Checks payable to: "Grace and Peace Institute" or "GAP IBS"

The G.A.P. Institute admits students of any race, color, and national or ethnic origin.

For Office Use Only: _____ **Date Received** _____ **Date Reviewed**

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**ENROLLMENT APPLICATION
(CONTINUED)**

Do you agree with our Tenets of Faith? _____ Yes _____ No

If yes, _____
Signature

If no, please explain the area of disagreement:

Position of the School on Doctrinal Disagreement:

Disagreement with the School's Tenets of Faith will not keep a prospective applicant from attending school, providing those areas of disagreement are not brought up in class, where they can create confusion, disharmony and strife. If these areas of disagreement are brought up in class by the student, the student will be asked to leave the School's enrollment, with no refund of his/her tuition.

"I am not in agreement with the School's Tenets of Faith. I have read the School's position on this matter, and agree not to bring up such matters of disagreement in class. I understand that if I do it would result in my dismissal from the School's enrollment and will forfeit any tuition paid by me."

Signature

Date