



NORTH CAROLINA BIBLE INSTITUTE

A Division of North Carolina College of Theology



*Reaching the World for Jesus...
One Student at a Time!*

APPLICATION

This application may be printed, personally signed
and submitted via mail to:

NCBI
PO Box 632
Castle Hayne, NC 28429

When completing the application digitally, you may also sign it using a previously saved digital signature file or you may create one using various software including Adobe Acrobat. Many versions of Adobe Acrobat will instruct you on how to create your personal digital signature when clicking onto the signature line. Your application may then be uploaded via our secure website.

North Carolina Bible Institute

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APPLICATION FOR ADMISSION

INSTITUTE DEAN

*PLEASE SUBMIT A RECENT PHOTO WITH APPLICATION

DATE					
NAME LAST		FIRST		MIDDLE or MAIDEN	
PHONE HOME		CELL		WORK	
SOCIAL SECURITY #			BIRTH DATE MM/DD/YEAR		
PLACE OF BIRTH CITY			STATE		SEX Male Female
MARITAL STATUS Single Divorced Married Other _____			NAME OF SPOUSE (if applicable)		
MAILING ADDRESS (include Apt #, if applicable) STREET / PO BOX					
CITY			STATE		ZIP
EMAIL ADDRESS					

PROGRAM OF
DESIRED ENROLLMENT

LEVEL OF ENROLLMENT

- ☐ ASSOCIATE ☐ MASTERS ☐ DOCTORATE OF CHRISTIAN COUNSELING
☐ BACHELOR ☐ DOCTORATE OF THEOLOGY ☐ DOCTORATE OF CHURCH LEADERSHIP
☐ GRADUATE ☐ DOCTORATE OF ESCHATOLOGY

Type your name exactly as you
would like it on all documents.



BACKGROUND INFORMATION (This information taken to better serve you as a student.)

Present Occupation				How long?			
Employer							
Name of Local Church							
Address			City		State		Zip
Pastor's Name					Contact Phone		
Are you a minister?		Yes	No	Licensed?	Yes	No	Ordained?
							Yes
							No
							Other?
How long have you been in full-time service?				years		months	
To what denomination or organization do you belong or classify yourself?							
Reference: Relative/Friend					Relationship		
Address			City		State		Zip

ETHNIC ORIGIN *(This information required by the Civil Rights Act.)*

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Caucasian (non-Hispanic)	Asian Pacific Islander	Hispanic	Black (non-Hispanic)	American Indian/Alaskan
Other - Specify				

CITIZENSHIP

Country of Birth	Are you a citizen of the United States?		Yes	No	<i>If NO, please answer the following questions.</i>
Of what country are you a citizen?					
Are you a permanent U.S. resident?		Yes	No	Alien Registration #	
Do you presently have a U.S. Visa?		Yes	No	If yes, what type?	Expiration Date

EDUCATION INFORMATION

Name of High School			Date of Graduation		
City		County		State	
If you did not graduate, have you obtained a GED?		Yes	No	When? (MM/DD/YEAR)	

List ALL colleges attended in chronological order (latest last)...If additional space is needed, please use page 4)

Name of Institution			City		State	
Dates attended: From		to	Hours Earned		Semester	Quarter
Degree(s) Received						
Name of Institution			City		State	
Dates attended: From		to	Hours Earned		Semester	Quarter
Degree(s) Received						
Name of Institution			City		State	
Dates attended: From		to	Hours Earned		Semester	Quarter
Degree(s) Received						
Are you currently enrolled in the last institution attended?		Yes	No	If so, what will be your last date of attendance?		
Are you eligible for re-admission to any of the institutions listed?		Yes	No			
If no, are reasons		Academic?	Disciplinary?	Other (please explain on page 4)		

ADDITIONAL INFORMATION

Have you ever been convicted for the violation of any federal, state, county, or municipality law? (excluding minor traffic violations)	Yes	No	<i>If yes, give full details on page 4.</i>
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The application will not be processed without the following items:

1. \$60.00 Non-Refundable Application fee must be submitted with the application
2. Photo ID
3. High School Diploma/Transcript
4. Highest level of education: Transcript/Degree before applying for NCBI

☐

By checking this box you are acknowledging that NCBI is accredited by religious accreditations. All programs provided by NCBI are solely for religious vocations only. Transferability of credits from NCBI to another institution is at the discretion of the receiving institution.

I have completed this application to the best of my ability and have been truthful to the best of my knowledge in answering all questions. I do hereby agree to abide by the high ethical standards set forth by the North Carolina Bible Institute and to conduct myself in accordance to the expectation of NCBI in order for my life to bring glory and honor to the Lord, Jesus Christ.

I have read the Statement of Faith of the North Carolina Bible Institute and agree to follow its doctrinal stand in accordance to the Word of God.

Signature _____

Date _____

COPYRIGHT ACKNOWLEDGMENT AND AGREEMENT

As a student, an affiliate with North Carolina Bible Institute, I do hereby acknowledge submission to the **COPYRIGHTS of ALL NCBI CURRICULUM and RESOURCE MATERIALS.** At no time will I, the student, copy or plagiarize NCBI curriculum or resource materials.

By my signature below, I hereby agree and submit to these terms.

Signature _____

Date _____

Institute Dean: _____

Additional educational information and/or explanation:

Additional information regarding conviction for the violation of any federal, state, county, or municipality law (excluding minor traffic violations):

Additional miscellaneous information:



Itemization for Monthly Fee Payments

PROGRAM	BOOK FEE	TUITION FEE	ADMINISTRATION FEE	GRADUATION FEE	TOTAL
ASSOCIATE	\$400.00	\$1,580.00	\$200.00	\$100.00	\$2,280.00
	<i>Total of \$2,280.00 divided by 10 months = \$228.00*</i>				
BACHELOR	\$400.00	\$1,680.00	\$200.00	\$100.00	\$2,380.00
	<i>Total of \$2,380.00 divided by 10 months = \$238.00*</i>				
GRADUATE	\$400.00	\$1,835.00	\$200.00	\$200.00	\$2,635.00
	<i>Total of \$2,635.00 divided by 10 months = \$263.50*</i>				
MASTER	\$400.00	\$1,980.00	\$200.00	\$200.00	\$2,780.00
	<i>Total of \$2,780.00 divided by 10 months = \$278.00*</i>				
DOCTORATE • Theology • Counseling • Leadership • Eschatology	\$640.00	\$3,250.00	\$200.00	\$350.00	\$4,440.00
	<i>Total of \$4,440.00 divided by 10 months = \$444.00*</i>				

PLEASE NOTE

* Application Fee is not included in the monthly fee. This fee is due at the time of enrollment.

** The curriculum for the Associate, Bachelor, Graduate and Master's Programs will be provided digitally. To receive a physical copy of the curriculum for these programs, an additional payment of \$100 will be applied.

North Carolina Bible Institute
P.O. Box 632 • Castle Hayne, NC 28429
910-395-5593 / 910-398-3990
www.NCBibleInstitute.org



Electronic Funds Transfer to North Carolina College of Theology

Please complete and return form to:

NCCT • P.O. Box 632 • Castle Hayne, NC 28429

When choosing bank draft, please include a copy of a voided check or savings deposit slip.

PERSONAL INFORMATION

Name(s)		Class Year(s)
Address		
City	State/Province	Zip/Postal Code
Telephone	Email	

☐ New Authorization ☐ Change in Authorized Amount ☐ Change in Account

I hereby authorize BANK to process automatic debits on behalf of North Carolina College of Theology from the account listed below. In doing so, I authorize the below institution to honor said debits. **This authorization will remain in effect until and unless I give notification to terminate at least 30 days before the date of next scheduled withdrawal.**

Bank Name

Address

City	State	Zip Code
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COMPLETE FOR PAYMENTS BY BANK DRAFT

COMPLETE FOR PAYMENTS BY CREDIT CARD

☐ Checking Account ☐ Savings Account

Name(s) on Card

Name(s) on Account

Credit Card #

Routing # (Bank Use Only)

Expiration Date

Account #

CVV#

4% Transaction Fee

MONTHLY FEE PAYMENT

DEGREE PROGRAM: ☐ Associate ☐ Bachelor ☐ Graduate ☐ Master ☐ Doctorate

TERM OF PAYMENTS: 10 Months

**Monthly
Payment**

Date of Withdrawal will be on the 1st of each month.

The first payment will be drafted the first month after acceptance. A \$25 fee will be applied for any returned payment.



APPLICATION FEE is not included in the monthly fee. This fee is due at the time of enrollment. Please check the applicable box below if you would like us to withdraw the Application Fee with the payment method provided above.

ASSOCIATE / BACHELOR / GRADUATE / MASTER'S PROGRAMS

☐ Withdraw \$60 Application Fee. ☐ Withdraw an additional \$100 Book Fee for a physical copy of the curriculum.

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Authorized Signature _____

Print Signature _____

Date _____

FOR OFFICE USE ONLY

First Draft Date _____

Last Draft Date _____