

Victory

Bible School

Application

2009-2010

VBS Application Checklist

All applicants must submit the following to complete the application process:

Completed Application

\$25 Application Fee included with application

Photograph (head and shoulders view) attached to application

Pastoral Recommendation Form

Personal Recommendation Form

International Applicants must also include:

Financial guarantee for Admission Form

Bank Statement(s) of guarantor with conversion to \$US provided

VBS Personal Data Form

VBS Marital Status Form

Proof of English Proficiency (High School Transcripts, TOEFL scores or equivalent)

F-1 Transfer Form (if applicable)

Application fee and all documents should be submitted to:

**Victory Bible School
1710 S. Amphlett Blvd.
Suite 111
San Mateo, CA 94402
USA**

Victory

Bible School

Victory Bible School
1710 S. Amphlett Blvd. Suite 111
San Mateo, CA 94402
(650) 655-4748 Fax (650) 655-4752

APPLICATION FOR ADMISSION

Victory Bible School does not discriminate on the basis of race, color, gender, nationality, ethnic origin or disability in the administration of its educational policies, admissions policies or any school-administered program.

PLEASE TYPE OR PRINT ALL INFORMATION

OFFICE USE ONLY

Documents Received	_____
Application	_____
Application Fee	_____
Photograph	_____
Pastoral Recommendation	_____
Personal Recommendation	_____
International Student:	
Financial Guarantee	_____
Bank Statement(s)	_____
VBS Personal Data Form	_____
VBS Marital Status Form	_____
English Proficiency	_____
F-1 Transfer	_____

Approved

Not Approved

*Attach a
Recent Photograph
Here*

PERSONAL INFORMATION

Year you intend to enter Victory Bible School September _____ (year)

Full Legal Name Mr. Mrs. Miss _____

Preferred Name _____ Social Security No. _____

Mailing Address Street _____ Apt. # _____

City _____ State ____ Zip/Post Code _____ Country _____

Home Phone (____) _____ Cell Phone (____) _____ Work Phone(____) _____

E-mail _____ Fax (____) _____

Preferred method of contact Home Phone Cell Phone Work Phone Email

Marital Status Single Engaged Married Separated Divorced Widowed

Number of Children _____ Ages _____

Date of Birth _____ / _____ / _____ Age _____

Month Day Year

Place of Birth City _____ State _____ Country _____

Citizenship USA Other (country) _____

International Applicants:

Do you have a Green Card? Yes *If yes, please include a copy. (A# _____)*

No Visa Type _____

T-shirt Size Small Medium Large XL XXL 3XL

How did you learn about VBS?

FAMILY INFORMATION

Spouse's Name _____ Occupation _____

Denominational Preference _____

Has your spouse accepted Jesus Christ as his/her personal Savior

Yes How long ago _____ No

Does your spouse support your decision to attend VBS?

Yes No

Father's Name _____

Address _____

City _____ State _____ Zip _____

Home Phone (____) _____

Denominational Preference _____

Mother's Name _____

Address _____

City _____ State _____ Zip _____

Home Phone (____) _____

Denominational Preference _____

SPIRITUAL INVENTORY

Home Church _____ Denomination _____

Pastor's Name _____

Address _____

City _____ State _____ Zip _____

Home Phone (____) _____ Fax (____) _____

Email _____ How long have you attended? _____

Are you a member? Yes No

Have you accepted Christ as your personal Savior

Yes How long ago? _____ No

Since you have been born again, have you been involved in the following? If yes, how long ago?

Alcohol _____ months

Drugs _____ months

Tobacco products _____ months

Eating disorders _____ months

Gambling _____ months

Homosexuality _____ months

Pornography _____ months

Sexual Promiscuity _____ months

EDUCATIONAL INFORMATION

Are you a high school graduate? Yes No If no, do you have a GED yes No

Please list all academic institutions. Begin with high school.

Name & Address of School	Dates (From /To)	Course of Study	Degree/Diploma

List any special talents and/ or ministry experience here:

FINANCIAL INFORMATION

How do you plan to pay for school expenses?

Personal Employment Spouse's Employment Savings Other _____

Do you have any financial obligations that may hinder your commitment to VBS

No Yes If yes, please list below.

Creditor Names	Starting Date	Current Balance	Monthly Payment

Do you owe any student loans? Yes No If yes, please explain _____

HEALTH INFORMATION

Briefly state the general condition of your health _____

Have you been diagnosed with any medical illness in the last two years? No Yes

If yes, please explain. _____

Are you currently taking any prescription drugs? No Yes

If yes, please explain. _____

Are you aware of any physical illness, mental illness or chronic disease that could interfere with your studies at VBS? No Yes If yes, please explain.

In case of an emergency, whom should we contact?

Name _____

Address _____

City _____ State _____ Zip _____ Country _____

Home Phone (____) _____ Alternate Phone (____) _____ Cell Work

MEDICAL CONSENT

I, the undersigned, do hereby state that on the date indicated I grant full permission to Victory Bible School, or any related or consulting physician, to render or give emergency medical care or treatment that is deemed necessary. I also state that, should extended hospitalization be required, I grant complete permission for such care and treatment to be given. I also state that by granting such permission, I absolve Victory Bible School of any financial liability pertaining to such medical treatment or hospitalization.

Signature _____ Date _____

PLEDGE OF COMMITMENT

The call to Christian service includes the call to lead by example. Because a Christian leader's personal life must be above reproach, the ministry training at VBS includes developing high personal standards of conduct. Victory Bible School is committed to helping you live a life of excellence with regard to reputation, respect, honesty and moral integrity. To this end, we ask that each student strive to follow this commitment.

My signature is my acknowledgement to honor the Lord Jesus Christ, Victory Bible School, and to strive to follow this commitment.

I commit to living a life of excellence and integrity that will bring glory to God.

I commit to growing spiritually.

I commit to being a positive influence on other students.

I commit to honesty and integrity. Therefore I will not gossip, lie or cheat.

I commit to taking care of all my financial obligations.

I commit to being on time, to attending all required classes, services and activities held by VBS and to faithfully attending my local church.

I commit to living a life of purity. Therefore I will keep from any illegal or unethical acts. This includes but is not limited to sexual immorality, sexual misconduct, homosexuality/ lesbian behavior, the taking of illegal drugs, alcohol, tobacco products and the viewing of pornographic materials, including Internet pornography. I will not physically or verbally abuse any person or thing.

I commit to abiding by the rules and regulations of VBS, which may from time to time be altered by the school. I understand that in order to maintain the highest level of training and to safeguard its ideals of spiritual and moral values, VBS reserves the right to require the withdrawal of any student if, in the judgment of the Director of Victory Bible School or the administrative team of Victory International Church, the conduct of the student is deemed to violate VBS' ideals of scholarship or its spiritual or moral atmosphere as a Christian school.

The signing of the Pledge of Commitment acknowledges I have read and agreed to the above criteria for admittance into VBS. Any violation of this Code is grounds for dismissal by Victory Bible School.

STATEMENT OF TRUTH

I, the undersigned, hereby state that the information contained in this application is true and correct. I understand that if Victory Bible School is notified that any information contained in this application is false, it will be grounds for either denial of admission or immediate dismissal from VBS.

Signature _____

Date _____

Victory

Bible School

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San Mateo, CA 94402

(650) 655-4748 Fax (650) 655-4752

PASTORAL RECOMMENDATION

This section should be completed by the applicant.

Name _____ Phone (____) _____

Address _____ City _____ State _____ Zip _____

I authorize the pastor listed on this form to complete the recommendation and return it to Victory Bible School. I understand that this form is confidential and that I will not be entitled to review the completed document. I release this pastor and Victory Bible School from all claims, liabilities and damage that could arise from disclosure of information consistent with authorization.

Signature _____ Date _____

A pastor should complete this section and return it directly to VBS.

Pastor's Name _____ Church Name _____

Address _____ City _____ State _____ Zip _____

Denomination _____

1. How long have you known the applicant? _____
2. How well do you know the applicant? Very Well Well Casually
3. Do you believe the applicant has a personal relationship with Jesus Christ Yes No
4. Do you believe the applicant possesses the necessary qualities to succeed at VBS?
 Yes No If no, what are they lacking? _____

Rank the following areas:	Excellent	Above Average	Average	Below Average
Leadership	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emotional Stability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Peer Relationships	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Spiritual Maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Morality	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Social Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Submission to Authority	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments _____

Is there any reason why the applicant should not be admitted to Victory Bible School?

Based on the above information, I strongly recommend recommend do not recommend this applicant for admission.

Signature _____ Date _____

Victory

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PERSONAL RECOMMENDATION

This section should be completed by the applicant.

Name _____ Phone (____) _____

Address _____ City _____ State _____ Zip _____

I authorize the person listed on this form to complete the recommendation and return it to Victory Bible School. I understand that this form is confidential and that I will not be entitled to review the completed document. I release this pastor and Victory Bible School from all claims, liabilities and damage that could arise from disclosure of information consistent with authorization.

Signature _____ Date _____

A friend should complete this section and return it directly to VBS.

Pastor's Name _____ Church Name _____

Address _____ City _____ State _____ Zip _____

Denomination _____

5. How long have you known the applicant? _____
6. How well do you know the applicant? Very Well Well Casually
7. Do you believe the applicant has a personal relationship with Jesus Christ Yes No
8. Do you believe the applicant possesses the necessary qualities to succeed at VBS?
 Yes No If no, what are they lacking? _____

Rank the following areas:	Excellent	Above Average	Average	Below Average
Leadership	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emotional Stability	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Peer Relationships	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Spiritual Maturity	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Morality	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Social Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Submission to Authority	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments _____

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Signature _____ Date _____