

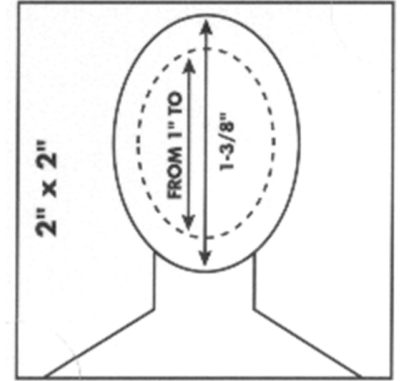


# Bible School

## Student Admission Application

Slavic Christian Center  
2014 S 15<sup>th</sup> St  
Tacoma, WA 98405

[www.slaviccenter.org/bibleschool](http://www.slaviccenter.org/bibleschool)  
[administrator@slaviccenter.com](mailto:administrator@slaviccenter.com)  
Phone: 253-209-9215



### Do you meet requirements?

1. Be 16 or older (If not, arrange special appointment with Bible School Administration).
2. Able to attend lessons every Monday from 7:00 PM to 10:00 PM.
3. Able to pay \$40 per month, as tuition fees towards students' expenses.
4. Be a Christ-centered person and willing to grow in Biblical knowledge and in Faith.

### Fill up this Application and bring it to Bible School.

<p>Full name: _____</p> <p>Address: _____ _____</p> <p>Phone Number: _____</p> <p>Email Address: _____</p> <p>Your age: _____</p> <p>Your Parents: _____</p>	<p><b>Your Current Secular Education Level:</b></p> <p><input type="checkbox"/> High School</p> <p><input type="checkbox"/> 2 year College/Associate Degree</p> <p><input type="checkbox"/> University/Bachelor Degree</p> <p><input type="checkbox"/> University/Master Degree</p> <p><input type="checkbox"/> Other</p> <p>_____</p> <p><b>Your Current Biblical Education Level:</b></p> <p><input type="checkbox"/> Sunday School Teacher</p> <p><input type="checkbox"/> Associate Degree in Theology</p> <p><input type="checkbox"/> Bachelor degree in Theology</p> <p><input type="checkbox"/> Master degree in Theology</p>
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I certify that the information provided on this application is complete and accurate to the best of my knowledge.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_