



ABUNDANT LIFE BIBLE INSTITUTE
(A Ministry Training School)

Application for Enrollment

Please fill out this form and mail it along with your \$50.00 registration fee to:

Abundant Life Bible Institute, 43 S. Jefferson Rd., Whippany, N.J. 07981
973-463-9455 Fax number: (973-463-9677)

ALBI email: info@albiw.com

ALBI Website: www.albiw.com

Make sure all forms are sent back to school at the same time:

Main Information:

Name: _____ **SSN:** ____-____-_____

Sex: M____ F____ **Date of Birth:** ____/____/____

Address: _____

City: _____ **State:** _____ **Zip:** _____

Phone: (day) (____) ____-_____

(Evening) (____) ____-_____

Cell phone: (____) ____-_____

Fax #: (____) ____-_____

Email: _____

Diploma Desired:

____ **Certificate of Biblical Studies (30 Credits required)**

____ **Associate of Theology (60 Credits required)**

____ **Advanced Ministry Diploma (90 Credits required)**

____ **Bachelor of Theology (120 Credits required)**

General Information:

___ Single ___ Married ___ Divorced ___ Widowed

Military Service: ___ Yes ___ No

Active Reserve: ___ Yes ___ No

Serve in a church position: ___ Yes ___ No Position: _____

How long: _____

Name and address of Church you attend: _____

Pastor's Name: _____ Phone#:(____) ____ - _____

Academic History:

High School: _____

Location: _____

Graduation Date: ____/____/____

College or Bible Institute: _____

Location: _____

Degree / Diploma: _____

Graduation Date: ____/____/____

Post Graduate or Trade school: _____

Location: _____

Degree / Diploma: _____

Graduation Date: ____/____/____

Major: _____ Minor: _____

Academic Achievements / Honors: _____

(Attach Extra Sheets if Needed)

Place of Birth: _____

Ethnic Origin (optional): _____ (White/European , Asian, Black /African, Central or South American, Caribbean Islands, etc., for example)

References:

Please list the names, addresses, and phone numbers of at least three references. One must be from your local church. The other two can be from your workplace or friends.

Name: _____ **Address:** _____
City: _____ **State:** _____
Zip Code: _____
Telephone #: (____) ____ - _____

Name: _____ **Address:** _____
City: _____ **State:** _____
Zip Code: _____
Telephone #: (____) ____ - _____

Name: _____ **Address:** _____
City: _____ **State:** _____
Zip Code: _____
Telephone #: (____) ____ - _____

Will you be attempting to transfer credits to Abundant Life Bible Institute from another institution? ___Yes* ___No

***If yes, you must have an official transcript sent to us directly from the institution you wish to transfer credits from.**

I give Abundant Life Bible Institute permission to contact any references listed in this application. I have also read the statement of faith and the code of conduct in the ALBI handbook and agree to abide by both.

Date: ____/____/____

Signature of Student: _____

- **Please include your nonrefundable \$50.00 registration fee.**
- **Give your Pastor the Pastor's Recommendation form and have him fill it out and send back to the school.**
- **If you plan to transfer credits from a former college or training program you will need to contact your former college(s) and have them mail official copies of your transcripts for transfer evaluation.**

ABUNDANT LIFE BIBLE INSTITUTE
43 S Jefferson Ave. Whippany, N.J. 07981
(973) 463-9455 www.albiw.com

PASTOR'S RECOMMENDATION

TO ATTEND ABUNDANT LIFE BIBLE INSTITUTE...

A MINISTRY TRAINING CENTER

Pastor: Please fill out and send it back in the self -addressed envelope provided by the student.

(Students, make sure you have all of your paperwork including this envelope and send it back to

ALBI) at 43 S. Jefferson Ave. Whippany, N.J. 07981

(Please Print)

Students Name: _____

Students Phone: (____) ____ - _____

Church you Attend: _____

Pastor's Name: _____

Church Phone #: (____) ____ - _____

Ministries you are involved with:

- 1.
- 2.
- 3.
- 4.

Pastor's Recommendation: _____

Pastor's Signature: _____

Pastor's Phone #: (____) ____ - _____

Date: ____/____/____

If you have any questions or concerns, please call Rev. Marc Siegel at: (973) 463-9455