



FLORIDA BAPTIST COLLEGE

Charting the Course for Ministry

ONLINE APPLICATION PACKET

Thank you for your interest in Florida Baptist College! To ensure the quickest processing of your request, please follow the directions below and fill out each form accurately.

1

To complete the *Admission Applications*, fill in all of your personal information then include your \$25 non-refundable application fee and a photograph of yourself and send to the address given at the bottom of the form.

2

Give your copy of the *Pastor's Reference Form* to your pastor. Have him fill it out and mail it to the address given at the bottom of the form.

3

Give a copy of the *Personal Reference Form* to two different people who are not family members. Have each of them fill it out and mail it to the address given at the bottom of the form.

4

To complete the *Scholarship Application*, mark any scholarships that you would like to apply for. You may apply for more than one scholarship, but will only receive the scholarship of the highest amount. Send this form to the address given at the bottom of the form.

5

Give a copy of the *Transcript Request Form* to your high school or college registrar. Have them send your transcripts to the address given at the bottom of the form.



Florida Baptist College
PO Box 260457
Tampa, FL 33685-0457

1.888.FBC.3030
813.888.5368 (fax)

Admission Application

Legal Name _____
Last First (Mr./Mrs./Miss) Middle Maiden

Preferred Name _____ Date of Birth _____ Social Security No. _____ - _____ - _____

Address _____
Street PO Box

City State ZIP

Home Telephone (_____) _____ Other Telephone (_____) _____

Email _____ Citizen: US Other _____ Do you have a student visa? Yes No

Current Marital Status: (Please circle all that apply.) Married Spouse's Full Name _____

Single Engaged Widowed Separated* Divorced* Remarried* Single Parent*

*Please send a letter of explanation with this application.

Family Information

Father's Name _____ Occupation _____

Address _____
Street PO Box

City State ZIP

Home Telephone (_____) _____ Other Telephone (_____) _____

Mother's Name _____ Occupation _____

Address _____
Street PO Box

City State ZIP

Home Telephone (_____) _____ Other Telephone (_____) _____

Do your parents agree with your attending Florida Baptist College? Yes No If no, please explain. _____

If you do not live with your parents, please explain why. _____

Academic Information

High School Name (now attending or from which you graduated) _____

Type of School Christian Public Private Home School Date of Graduation (Mo./Yr.) _____

Address _____
Street PO Box

City State ZIP

Home Telephone (_____) _____ Other Telephone (_____) _____

Probable Major(s) _____

Have you taken the *ACT*? Yes No What was your score? _____

Have you taken the *SAT*? Yes No What was your score? _____

Please list all colleges, Bible Institutes, or technical schools you have attended. (Use separate sheet if necessary.)

School Name _____ Dates Attended _____ Degree _____

Address _____

Street

PO Box

City

State

ZIP

School Name _____ Dates Attended _____ Degree _____

Address _____

Street

PO Box

City

State

ZIP

Do you have any outstanding debt to any of college or university? Yes No

Have you ever been denied enrollment, suspended, or dismissed from any school? Yes No If yes, please explain _____

Spiritual Information

Have you trusted Jesus Christ as your personal Savior? Yes No When? _____

Have you been baptized by immersion? Yes No Church where baptized _____

Are you a member of a church? Yes No Pastor's Name _____

Church Name _____ Attend Regularly? Yes No

Address _____

Street

PO Box

City

State

ZIP

Home Telephone (_____) _____ Other Telephone (_____) _____

Briefly write your salvation testimony on a separate sheet of paper and attach it to this application.

How did you hear about Florida Baptist College? _____

Why do you believe God would have you apply to Florida Baptist College? _____

What do you believe God would have you do after your college education at Florida Baptist College? _____

Financial Information

How do you plan to finance your education? _____

Statement of Intent

By signing this application for admission, I certify that my answers are true and complete. I understand that any untrue or inaccurate statement made on this application or on any other enrollment document will make me ineligible for admission and subject to immediate dismissal from Florida Baptist College. I further understand that attending Florida Baptist College is a privilege granted to those who maintain a godly Christian testimony and who comply with the academic standards of Florida Baptist College. I further certify that I am willing, if accepted to Florida Baptist College, to cooperate with the purpose and standards of Florida Baptist College; to abide by all of the rules, regulations, and policies of Florida Baptist College; and to comply with its doctrines in order to fully advance the cause of Christ and the testimony of Florida Baptist College.

Signature _____ Date _____

Mail this completed application along with the \$25.00 fee and photo to:

Florida Baptist College
Attn: Registrar
PO Box 260457
Tampa, FL 33685-0457



Florida Baptist College
PO Box 260457
Tampa, FL 33685-0457

1.888.FBC.3030
813.888.5368 (fax)

Pastoral Reference Form

Applicant Information

Applicant Name _____ Pastor's Name _____

(If you are related to your pastor, please have an associate pastor or deacon who is not a relative provide this reference.)

I hereby authorize the above-named pastor to provide the following personal information about me to Florida Baptist College to be considered in its decision concerning my application for admission. I understand that this information will be kept confidential by Florida Baptist College and will not be released to me or anyone else without a legitimate need to know this information. I hereby release and agree to hold harmless Florida Baptist College, the above-named pastor, and their agents, employees, and volunteers, from any and all liability for damages and expenses, of whatever kind (including attorney's fees), resulting from collecting or providing this reference.

Applicant Signature _____ Date _____

Reference Information (Please complete this form and mail directly to the address listed on the following page.)

Pastor's Name _____

Address _____

Street

PO Box

City

State

ZIP

Home Telephone (_____) _____ Other Telephone (_____) _____

What is your age category? 21-30 31-40 41-50 50+

How long and in what capacity have you known the applicant? _____

Briefly explain how well you believe you know the applicant. _____

To your knowledge, has the applicant trusted Jesus Christ as his or her personal Savior? Yes No

To your knowledge, has the applicant followed the Lord in believer's baptism in a Baptist church? Yes No

To your knowledge, does the applicant tithe to the local church? Yes No

To your knowledge, does the applicant faithfully attend the local church? Yes No

Please use the following scale to provide your assessment of the applicant's Christian character by circling the number that you believe best describes the applicant in each character trait category. If you have not had sufficient opportunities to observe particular character traits of the applicant, please leave that category blank, if you believe your assessment needs an explanation, please explain on the blanks provided.

Scale: 5-Outstanding 4-Above Average 3-Average 2-Below Average 1-Poor

Attitudes and Actions Towards Parents	5	4	3	2	1
Involvement in the Local Church	5	4	3	2	1
Respect for Authority	5	4	3	2	1
Consistency in the Christian Life	5	4	3	2	1
Integrity	5	4	3	2	1
Ability to Work with Others	5	4	3	2	1
Leadership Ability	5	4	3	2	1
Dependability	5	4	3	2	1
Attitudes and Actions toward Opposite Sex	5	4	3	2	1
Moral Purity	5	4	3	2	1
Desire for Spiritual Growth	5	4	3	2	1
Personal Appearance	5	4	3	2	1

Burden for the Lost	5	4	3	2	1
Handling of Finances	5	4	3	2	1
Work Ethic	5	4	3	2	1
Intellectual Ability	5	4	3	2	1
Loyalty	5	4	3	2	1
Friendliness	5	4	3	2	1

Explanation _____

Please provide a narrative response to the following questions.

1. Please provide a general reference for the applicant, including, but not limited to, whether you would recommend him or her for enrollment in Florida Baptist College. _____

2. What are the applicant's greatest strengths? _____

3. What are the applicant's greatest weakness? _____

4. Would you want your child to closely associate with the applicant? Please explain. _____

5. Please describe the applicant's service and ministry in the local church. _____

6. Does the applicant live a life of personal holiness and evidence a desire to separate from the world? Please explain. _____

7. Are you aware of any moral, physical, or emotional condition in the applicant's past or present life that has affected his or her Christian testimony, that may affect his or her ability to adapt to college life, or that may affect his or her ability to engage in full-time Christian service? If so, please explain. _____

8. Is the applicant "going steady", engaged, or considering marriage? If so, please state whether you know the other person and what you know about him or her. _____

9. Is the applicant a leader or a follower? Please describe the applicant's leadership abilities. _____

10. Is there additional information which, in your opinion, would especially qualify or disqualify the applicant from preparing for or entering Christian service? Please explain. _____

Mail this completed form to: Florida Baptist College
Attn: Registrar
PO Box 260457
Tampa, FL 33685-0457



Florida Baptist College
PO Box 260457
Tampa, FL 33685-0457

1.888.FBC.3030
813.888.5368 (fax)

Personal Reference Form

Applicant Information

Applicant Name _____ Reference Name _____
(Please have someone who is not a relative provide this reference.)

I hereby authorize the above-named reference to provide the following personal information about me to Florida Baptist College to be considered in its decision concerning my application for admission. I understand that this information will be kept confidential by Florida Baptist College and will not be released to me or anyone else without a legitimate need to know this information. I hereby release and agree to hold harmless Florida Baptist College, the above-named reference, and their agents, employees, and volunteers, from any and all liability for damages and expenses, of whatever kind (including attorney's fees), resulting from collecting or providing this reference.

Applicant Signature _____ Date _____

Reference Information (Please complete this form and mail directly to the address listed on the following page.)

Reference Name _____

Address _____

Street

PO Box

City

State

ZIP

Home Telephone (_____) _____ Other Telephone (_____) _____

What is your age category? 21-30 31-40 41-50 50+

How long and in what capacity have you known the applicant? _____

Briefly explain how well you believe you know the applicant. _____

To your knowledge, has the applicant trusted Jesus Christ as his or her personal Savior? Yes No

To your knowledge, has the applicant followed the Lord in believer's baptism in a Baptist church? Yes No

To your knowledge, does the applicant tithe to the local church? Yes No

To your knowledge, does the applicant faithfully attend the local church? Yes No

Please use the following scale to provide your assessment of the applicant's Christian character by circling the number that you believe best describes the applicant in each character trait category. If you have not had sufficient opportunities to observe particular character traits of the applicant, please leave that category blank, if you believe your assessment needs an explanation, please explain on the blanks provided.

Scale: 5-Outstanding 4-Above Average 3-Average 2-Below Average 1-Poor

Attitudes and Actions Towards Parents	5	4	3	2	1
Involvement in the Local Church	5	4	3	2	1
Respect for Authority	5	4	3	2	1
Consistency in the Christian Life	5	4	3	2	1
Integrity	5	4	3	2	1
Ability to Work with Others	5	4	3	2	1
Leadership Ability	5	4	3	2	1
Dependability	5	4	3	2	1
Attitudes and Actions toward Opposite Sex	5	4	3	2	1
Moral Purity	5	4	3	2	1
Desire for Spiritual Growth	5	4	3	2	1
Personal Appearance	5	4	3	2	1

Burden for the Lost	5	4	3	2	1
Handling of Finances	5	4	3	2	1
Work Ethic	5	4	3	2	1
Intellectual Ability	5	4	3	2	1
Loyalty	5	4	3	2	1
Friendliness	5	4	3	2	1

Explanation _____

Please provide a narrative response to the following questions.

1. Please provide a general reference for the applicant, including, but not limited to, whether you would recommend him or her for enrollment in Florida Baptist College. _____

2. What are the applicant's greatest strengths? _____

3. What are the applicant's greatest weakness? _____

4. Would you want your child to closely associate with the applicant? Please explain. _____

5. Please describe the applicant's service and ministry in the local church. _____

6. Does the applicant live a life of personal holiness and evidence a desire to separate from the world? Please explain. _____

7. Are you aware of any moral, physical, or emotional condition in the applicant's past or present life that has affected his or her Christian testimony, that may affect his or her ability to adapt to college life, or that may affect his or her ability to engage in full-time Christian service? If so, please explain. _____

8. Is the applicant "going steady", engaged, or considering marriage? If so, please state whether you know the other person and what you know about him or her. _____

9. Is the applicant a leader or a follower? Please describe the applicant's leadership abilities. _____

10. Is there additional information which, in your opinion, would especially qualify or disqualify the applicant from preparing for or entering Christian service? Please explain. _____

Mail this completed form to: Florida Baptist College
Attn: Registrar
PO Box 260457
Tampa, FL 33685-0457



Florida Baptist College
PO Box 260457
Tampa, FL 33685-0457
1.888.FBC.3030
813.888.5368 (fax)

Personal Reference Form

Applicant Information

Applicant Name _____ Reference Name _____
(Please have someone who is not a relative provide this reference.)

I hereby authorize the above-named reference to provide the following personal information about me to Florida Baptist College to be considered in its decision concerning my application for admission. I understand that this information will be kept confidential by Florida Baptist College and will not be released to me or anyone else without a legitimate need to know this information. I hereby release and agree to hold harmless Florida Baptist College, the above-named reference, and their agents, employees, and volunteers, from any and all liability for damages and expenses, of whatever kind (including attorney's fees), resulting from collecting or providing this reference.

Applicant Signature _____ Date _____

Reference Information (Please complete this form and mail directly to the address listed on the following page.)

Reference Name _____

Address _____

Street

PO Box

City

State

ZIP

Home Telephone (_____) _____ Other Telephone (_____) _____

What is your age category? 21-30 31-40 41-50 50+

How long and in what capacity have you known the applicant? _____

Briefly explain how well you believe you know the applicant. _____

To your knowledge, has the applicant trusted Jesus Christ as his or her personal Savior? Yes No

To your knowledge, has the applicant followed the Lord in believer's baptism in a Baptist church? Yes No

To your knowledge, does the applicant tithe to the local church? Yes No

To your knowledge, does the applicant faithfully attend the local church? Yes No

Please use the following scale to provide your assessment of the applicant's Christian character by circling the number that you believe best describes the applicant in each character trait category. If you have not had sufficient opportunities to observe particular character traits of the applicant, please leave that category blank, if you believe your assessment needs an explanation, please explain on the blanks provided.

Scale: 5-Outstanding 4-Above Average 3-Average 2-Below Average 1-Poor

Attitudes and Actions Towards Parents	5	4	3	2	1
Involvement in the Local Church	5	4	3	2	1
Respect for Authority	5	4	3	2	1
Consistency in the Christian Life	5	4	3	2	1
Integrity	5	4	3	2	1
Ability to Work with Others	5	4	3	2	1
Leadership Ability	5	4	3	2	1
Dependability	5	4	3	2	1
Attitudes and Actions toward Opposite Sex	5	4	3	2	1
Moral Purity	5	4	3	2	1
Desire for Spiritual Growth	5	4	3	2	1
Personal Appearance	5	4	3	2	1

Burden for the Lost	5	4	3	2	1
Handling of Finances	5	4	3	2	1
Work Ethic	5	4	3	2	1
Intellectual Ability	5	4	3	2	1
Loyalty	5	4	3	2	1
Friendliness	5	4	3	2	1

Explanation _____

Please provide a narrative response to the following questions.

1. Please provide a general reference for the applicant, including, but not limited to, whether you would recommend him or her for enrollment in Florida Baptist College. _____

2. What are the applicant's greatest strengths? _____

3. What are the applicant's greatest weakness? _____

4. Would you want your child to closely associate with the applicant? Please explain. _____

5. Please describe the applicant's service and ministry in the local church. _____

6. Does the applicant live a life of personal holiness and evidence a desire to separate from the world? Please explain. _____

7. Are you aware of any moral, physical, or emotional condition in the applicant's past or present life that has affected his or her Christian testimony, that may affect his or her ability to adapt to college life, or that may affect his or her ability to engage in full-time Christian service? If so, please explain. _____

8. Is the applicant "going steady", engaged, or considering marriage? If so, please state whether you know the other person and what you know about him or her. _____

9. Is the applicant a leader or a follower? Please describe the applicant's leadership abilities. _____

10. Is there additional information which, in your opinion, would especially qualify or disqualify the applicant from preparing for or entering Christian service? Please explain. _____

Mail this completed form to: Florida Baptist College
Attn: Registrar
PO Box 260457
Tampa, FL 33685-0457


Applicant Information

Applicant Name _____ Date of Graduation _____

Social Security _____ - _____ - _____ Date of Birth _____

Signature _____ Date _____

Please check the appropriate box by the scholarship for which you are applying and provide the required information. Students may apply for more than one scholarship, but will only be awarded the scholarship of the highest amount. Students must maintain a grade point average 2.5 each semester to continue receiving a scholarship.

☐ **Local Church Offering (LOCO) Scholarship**

- ☐ Full Scholarship – My church supports FBC for \$200 a month (No Tuition).
- ☐ Half Scholarship – My church supports FBC for \$100 a month (Half Tuition).

☐ **Christian Worker's Scholarship**

This Scholarship is available to any single, dependent student whose parent's primary income is received from full-time ministry. The amount of this scholarship is \$42,000 to be divided over a period of eight semesters. Qualifying information must be recertified each semester.

Parent's Name _____

Title _____

Pastor's Name _____

Ministry Name _____

Address _____

Office Telephone _____

☐ **Patriot's Scholarship**

This Scholarship is available to any student who has received an honorable discharge from the United States Armed Forces. The amount of this scholarship is \$3500 to be divided over a period of eight semesters. Applicants must attach a copy of their DD Form 214.

☐ **Academic Scholarship**

This scholarship is available to any student who has scored 1140 or higher on the SAT or 25 or higher on the ACT. The amount of this scholarship is \$2,000 to be divided over a period of eight semesters.

☐ **First Student Scholarship**

This scholarship is available to any student who is the first student to attend Florida Baptist College from a particular Independent Baptist Church. The amount of this scholarship is \$1,500 to be divided over a period of eight semesters.

Pastor's Name _____

Church Name _____

Address _____

Office Telephone _____



Florida Baptist College
PO Box 260457
Tampa, FL 33685-0457

1.888.FBC.3030
813.888.5368 (fax)

Transcript Request Form

To the Registrar or Principal of _____
High School or College Name

I have applied to Florida Baptist College for the ☐ Fall ☐ Spring Semester of 20____.

Please send my ☐ High School Transcript ☐ College Transcript to:

Florida Baptist College
Attn: Registrar
PO Box 260457
Tampa, FL 33685-0457

I agree to pay any fee associated with this request.

Signature

Date

Applicant Information

Applicant Name _____ Date of Graduation _____

Social Security _____ - _____ - _____ Date of Birth _____

Address _____
Street PO Box

City State ZIP

Home Telephone (_____) _____ Other Telephone (_____) _____

High School or College Name _____

Address _____
Street PO Box

City State ZIP

Home Telephone (_____) _____ Other Telephone (_____) _____