



Student Application

Mail to:
PO Box 11437
Portland, OR 97211

North Portland Bible College Application for Admission

Email: info@npbc.education
Phone: (503) 288-2919
Fax: (503) 282-3795

Personal Information

Name	Last:	First:	Middle:		
Address	Street:	City:	State: Zip:		
Phone	Home: () -	Mobile: () -	Email:		
Gender	Marital Status	Children	Your Birth	Resident Status	Citizenship
<input type="checkbox"/> Female <input type="checkbox"/> Male	<input type="checkbox"/> Married <input type="checkbox"/> Single	<input type="checkbox"/> None <input type="checkbox"/> #:	Date: / / Place:	<input type="checkbox"/> Oregon <input type="checkbox"/> Other:	<input type="checkbox"/> U.S. Citizen <input type="checkbox"/> Other:
	Veteran	Ethnicity (select one or more of the following)			
	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Hispanic or Latino <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African American	<input type="checkbox"/> Native Hawaiian or Other Pacific Islander <input type="checkbox"/> White <input type="checkbox"/> Other:		

If you have any special needs that North Portland Bible College should be aware of to help you succeed, please contact our admission team

Your Academic Program

Status	<input type="checkbox"/> New <input type="checkbox"/> Transfer <input type="checkbox"/> Early Admission <input type="checkbox"/> Not Sure				
Term	<input type="checkbox"/> Fall <input type="checkbox"/> Winter <input type="checkbox"/> Spring <input type="checkbox"/> Summer	Academic Year	<input type="checkbox"/> 2016-2017 <input type="checkbox"/> 2017-2018 <input type="checkbox"/> 2018-2019		
Please indicate your anticipated academic goal for attending NPBC	<input type="checkbox"/> Personal Growth/Training only		I want to take courses for Academic Credit		<input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/> Associate in Christian Ministry <input type="checkbox"/> Certificate in Christian Lay Counseling <input type="checkbox"/> Certificate in Biblical Studies <input type="checkbox"/> Certificate in Christian Teaching <input type="checkbox"/> Certificate in Pastoral Ministry <input type="checkbox"/> Certificate in Intercultural Studies		Do you intend to receive further education after you complete your studies at NPBC? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not Sure		

Your Education

Please indicate the highest level of education you have completed	High School	Undergraduate	Graduate
	<input type="checkbox"/> Diploma <input type="checkbox"/> GED <input type="checkbox"/> Some – Grades Completed:	<input type="checkbox"/> Bachelor's – Major: <input type="checkbox"/> Some – Credits Earned:	<input type="checkbox"/> Master's – Title: <input type="checkbox"/> Some – Credits Earned:
	Schools attended	Address	Date
High School:			

Your Family

Father or Guardian 1				
Relationship to student:				
Name	Last:	First:	Middle:	
Address	Street:	City:	State:	Zip:
Phone	Home: () -	Mobile: () -	Email:	
Mother or Guardian 2				
Relationship to student:				
Name	Last:	First:	Middle:	
Address	Street:	City:	State:	Zip:
Phone	Home: () -	Mobile: () -	Email:	

Your Faith

Church Congregation:		Senior Pastor:		
Address	Street:	City:	State:	Zip:
Phone: () -		Email:		
Please describe your Christian experience, church/ministry involvement, and any other information relating to why you are interested in attending NPBC (use the back if needed)				

Your Application

If you intend to receive academic credit, the following requirement that applies to you must be met before your first class begins:		
If you have received credit for a reading/writing course at the undergraduate level (college courses numbered 100 and above), transcripts of your highest level of education must be sent to NPBC directly from the school at which it was completed If you are a NEW student or TRANSFER student and have NOT received credit for a reading/writing course at or above the undergraduate level, you must complete a reading/writing assessment exam administered or approved by NPBC If you are an EARLY ADMISSION student, you acknowledge the need to have both you and your parents/guardians sign this application and also the NPBC Parental Consent form.		<input type="checkbox"/> I understand and agree to these requirements
The above is true to the best of my knowledge:	Sign:	Date: / /
Parent or Guardian		
Name:	Sign:	Date: / /