



**NEW BRUNSWICK BIBLE INSTITUTE
ADVANCED BIBLICAL MINISTRIES
APPLICATION**

This application form and the re-application fee should be sent by **July 15th** to:

ACADEMIC DEAN
NEW BRUNSWICK BIBLE INSTITUTE
2335 ROUTE 103
VICTORIA CORNER NB E7P 1C7
☎ (506) 375-2242/FAX: (506) 375-1800

ACCEPTANCE COMMITTEE

Student's Name: _____ (please print)

"I have carefully read the Advanced Biblical Ministries brochure and believe it is God's will for me to pursue this course of study."

Student's Signature

Date

Home Address: _____

Date of Birth: _____

- I will have a car available to me during this school year
 I will **not** have a car available to me

Telephone Number(s): () _____ - _____
() _____ - _____

Allergies: _____

Track Being Sought: _____

The courses of this track are:

#	_____	#	_____
#	_____	#	_____
#	_____	#	_____
#	_____	#	Independent Research Project

My Independent Research Project Title Is: _____

The I.R.P. course description: _____

Preferred Location of Internship:	Actual Placement:
Potential Mentor's Name: _____	_____
Address of church or organization:: _____ _____ _____	_____ _____ _____
Telephone(s):(_____) _____ (Home) (_____) _____ (Office)	Mentor: _____ Telephone(s):(_____) _____ (_____) _____

