

PLEASE COMPLETE AND RETURN
BROWN BIBLE INSTITUTE
ENROLLMENT APPLICATION

Email To: info@BrownLeadership.org

2024-2026

Full Name: _____

Full Address _____ **City** _____ **State** _____ **Zip** _____

Home Phone: _____ **Work Phone** _____

Fax: _____ **E-mail address:** _____

Cell Phone: _____

Contact in case of emergency: _____

Name

Phone

Marital Status: (circle that which apply) **Married** **Single** **Male** **Female**

How did you hear about B.B.I.? _____

This Section is for Congregants Only

A. What church are you presently attending? _____

B. How long have you attended this church? _____

Church phone number: _____ **Pastor's Name:** _____

This Section is for Pastors Only

A. Name of the church you are currently pastoring: _____

B. How long have you been pastoring your church? _____

Select the program of study for which you are enrolling:

Enrollment status:

Residential Studies (will be required to attend regularly scheduled classes)

Resident External Studies (in local area, will not be required to attend regularly scheduled classes)

External Non-Resident Studies (not in local area)

Independent Studies (on line self-paced)

Complete the following personal information:

A. Date of born again experience: _____

B. Are you presently enrolled in any secular educational pursuit? _____

