APPLICATION INSTRUCTIONS



Texas Independent Baptist Seminary & Schools 2200 W. Loop 281 Longview, TX 75604

We are excited that you are applying to Texas Independent Baptist Seminary & Schools. Students from around the world come to Texas Independent Baptist Seminary & Schools seeking more than just a diploma; they want practical ministry training as well as academic excellence. If you are ready for a challenge – spiritually, academically, and socially – Texas Independent Baptist Seminary & Schools is the place for you! This application represents your opportunity to be considered for admission to Texas Independent Baptist Seminary & Schools. When we have received the necessary form listed below, your application will be reviewed by the Texas Independent Baptist Seminary & Schools Administration.

At the end of this form, you will be reminded to click the share button in the upper right hand corner of the screen and email your application to: admissions@texasibs.org.

APPLICATION FOR ADMISSION

Texas Independent Baptist Seminary & Schools



Please click the paper clip icon in the tools column to attach a recent portrait of yourself.

attach a recent portrait of			
yourself.	Application for:	Select One:	I Have Applied to TIBS before:
	Fall Semester 20	☐ Freshman	□No
	Spring Semester 20	Transfer	Yes
	cation, a member of the Texas any questions, feel free to call	·	ninary & Schools administration il us at info@texasibs.org.
Date of application:			
	GENERAL IN	NFORMATION	
Anticipated date of entranc	e: Fall Spring 20	_	
Applicant Name:			
First	Middle	Last	
Address			
City	State		Zip
Home Phone ()	Cell Phone ()
Email:			_
Social Security N	lumber:	Date of Birth	n:
Gender: M F	Martial Status:	Single	aged Married
		Widowed Divo	orced Remarried
If married, spouse's name:_			Years Married:
		e Use Only	
Date Received HOW: □Pho	d Application Fee Paid ne □Web Form □In-Pers	Approved on DTour Group Othe	

FAMILY INFORMATION

Father's	Full Name		
Address	(if different	from above)	
		State Zip.	
		_) Cell Phone: ()	
Mother's	s Full Name		_
Address	(if different	from above)	
City		State Zip.	
		Cell Phone:	
		CONFIDENTIAL INFORMATION	
If you ar	nswer "yes"	to any of these questions, please write the date of the last occurrence.	
☐ Yes	☐ No	1. Have you used tobacco in the last year?	
Yes	☐ No	2. Have you used alcohol in the last year?	
Yes	■ No	3. Have you used non-prescription drugs in the last year?	
Yes	■ No	4. Have you attended movies in the last year?	
Yes	■ No	5. Have you attended dances in the last year?	
Yes	☐ No	6. Have you ever been convicted of a criminal offense other than a	
		minor traffic violation, or are there such criminal charges pending	
		against you at this time? If "yes," please enclose a statement	
		concerning offense and date of offense.	
Yes	☐ No	7. Have you ever been denied admission, expelled, dismissed,	
		suspended, or otherwise subject to any disciplinary action from any	
		secondary school or post-secondary school? If "yes," enclose a	
		statement concerning details including the name of the school, date	
		and reason for action.	

ACADEMIC INFORMATION

High school attended:			
School address:			
City		State	Zip
Graduation Date:			
If not a high school graduate, have you ea	rned a G.E.D. certific	ate? Yes/No	
Date	(mm/yyyy)	No	
List all post-secondary institutions you hav	e attended:		
Transfer Students: Do you expect to transfer you eligible to return to the last collegattended?		her college? \(\bigcap \)	∕es □No □No
Students must have their transcripts sen			
Graduate Programs Master of Theology, Th.M. Doctor of Theology, Th.D.	Theology Religious Eleme Religious Secon Religious Educa Christian Minist	entary Education dary Education tion Administra tries, Church Mu	
Undergraduate 2-Yr. Associate of Theology Religious Educational Assistant Religious Education Administration Christian Ministries, Church Music cor Christian Ministries, Church Office Ad	ncentration		

Texas Independent Baptist Seminary & Schools Application

No

Yes

Church Ministries, General Studies

Will you need dormitory housing?

CHURCH INFORMATION

Church Address:		
Church Phone:	Church Email:	
Pastor's Name:		
Pastor's Phone:	Pastor's Email:	
How many years have you attended this church?	Are you a member? Yes	No
Do you regularly attend church? Yes No	Is this an Independent Baptist (Church? Yes No
When were you saved?		
n what church were you baptized?		
What practical Christian experience do you have?		

- 1. Are you a Baptist by faith and doctrine? Yes No
- 2. Have you read and are you in complete and cheerful accord with the Doctrinal statement of Texas Independent Baptist Seminary & Schools? Yes No If "no," enclose an explanation of any area in which you disagree.
- 3. If accepted, do you agree to abide cheerfully by the standard of conduct and the rules and regulations of Texas Independent Baptist Seminary & Schools, on and off campus, while a student. Yes No

The T.I.B.S. Catalog is available for download from our website: https://texasibs.org.

AGREEMENT FORM

NOTICE

Falsifying or withholding information in completing this application violates the policies of Texas Independent Baptist Seminary & Schools and constitutes grounds for the immediate withdrawal of your application from further consideration or cancelation of your admission or registration.

I	hereby certify that this application is true and
complete to the best of my knowledge, with no omissions in an	y area. I also understand that any untrue statement may
subject me to immediate dismissal from Texas Independent Ba	aptist Seminary & Schools. If I am accepted, I agree to
comply with the doctrines, rules and regulations of the Long	•
conduct in accordance with the aims and objectives of Texas Inde	ependent Baptist Seminary & Schools.
	5
Signed:	Date:

Final step: Click share in the upper right hand corner and send to the following email: admissions@texasibs.org.