RBBI ONLINE DISTANCE LEARNING APPLICATION

This Application only needs to be filled out for those who are taking courses from RBBI for credit!

Name	Date//			
E-Mail address:				
Telephone numbers: Work #	Home #			
Address:				
Birth date:/	e 🛛 Female			
□ Single □ Engaged □	Married Remarried	Divorced	□ Separated	U Widowed
Children: 🛛 Yes 🖾 No				
Social Security #				
I have a High School diploma of	a GED? Yes No)		
Name of College or Institution;	Address; Dates Attended;	Hours completed		
				_
Home Church		Pastor '	Telephone	
Address:				
LIFE HISTORY				
Do you have a history of emotio	nal instability or psychiatr	ic treatment that i	s ongoing? 🗖 Yes	D No
If Yes, please specify:				
Because of ministry consideration offence background that is ongo for credit. Do you have a sexual	ing. A background check	may be completed		
If you were to die tonight, do yo Born Again?	u know for sure that you w	vould be going to	Heaven and have y	ou been
If you have answered no, Pastor for sure. E-mail him at: <u>rrbi@</u> a		an happy to share	with you how you	can know
Do you have a devotional life in	cluding prayer, Bible read	ing, and Bible stu	iy? 🗆 Yes 🗖 No	
You have two ways to submit th	is application to us at RBI	3I. You may mail	it to us at:	
	RBBI			
	Dr. Robso	n		
	4921 West W	ernett		
	Pasco, WA 9			
Or you may scan to e-mail.	Dr. Robson at: rrbi	@rvbc.us		