

REFERENCES

Please mention the names and addresses of two persons who will provide references on behalf of you, but not relatives.

1. Christian Leader.....	2. Pastor.....
.....
.....
.....Phone.....Phone.....

MY PLEDGE

I.....have completed all portions of this Application and to the best of my knowledge are true and correct. If admitted for the training, I promise to abide the rules of the Bible College and to keep the schedule of the program. I also understand that anything contrary to this will be liable for disciplinary action or dismissal from the College. And also I agree and promise to work anywhere in India under your Organization after finishing my Course.

Date..... Signature of the Applicant,

Place.....

Note: Please send the Application Form to the below address:

TO
The Registrar,
CALVARY BAPTIST BIBLE COLLEGE
23-A, Gangaianman Koil Ist Street,
(via - opp. Sri Padma Ram)
Vadapalani, Chennai-600026.

Ph. No: (044) 24817761 Cell No: 9382845768
E-mail: drpindia@gmail.com
Web Site: www.IndiaCalvaryMinistries.org

INCOMPLETE APPLICATION WILL NOT BE APPROVED

FOR OFFICE USE ONLY

Date of Application Received	:
Result of Screening	:	Approved/Refused
Interview Card Sent on	:
Interview Conducted on	:
Result of Interview	:	Admissible/Inadmissible
Admission Intimation Sent on	:
Required to Join on	:

Registrar

Principal

Director