

FREEDOM BIBLE COLLEGE AND SEMINARY



Branch Application

Revised 8-09

Please type or print. It is important to complete all information.

Professionalism, neatness and accurateness in completing your application package is important

Mail the completed application and related fees to

FBCS Branch System, 217 West Chestnut Street, Rogers, AR 72756

800-494-7497 or 479-636-7497 out of the U.S.A.

admissions@freedombiblecollege.org

Person Making the Request

Last Name _____ First _____ Middle _____

Street Address _____ City _____ State _____

Zip/Postal Code _____ Country _____

Home Phone _____ Office Phone _____ Fax _____

E-Mail _____

Concerning the Proposed Branch

Proposed Branch Name

Street Address _____ City _____ State _____

Zip/Postal Code _____ Country _____

Cell Phone _____ Office Phone _____ Fax _____

Branch President Nominate

Last Name _____ First _____ Middle _____ Sex _____

Street Address _____ City _____ State _____

Zip/Postal Code _____ Country _____

Home Phone _____ Office Phone _____ Fax _____

E-Mail _____

Web Page (if any) http://www.

Birth ___ - ___ - ___ SSN/SIN ___/___/___/ Church Membership _____

Years of Christian Service _____ Highest Academic Level Achieved _____

Education of the Branch President Nominate

Name of College or School	Date Graduated	Degree or Diploma

You must submit all transcripts reflecting the above

If the Branch President Nominate is not the Pastor

Pastor's Name _____ Pastor's Phone _____

Pastor's Address _____ City _____ State _____ Zip _____

Pastor's E-Mail _____

Branch and Training Fees

Include a check, money order or credit card number for the processing fee of \$125. If your application is approved, you will be notified and asked to pay the \$800 Branch Fee plus the \$800 Training Fee for a grand total of \$1725.

Include with this application a check, money order, Visa or Master Card number the amount of \$125.00.

___ I have enclosed check number _____ in the amount of \$ _____

___ I wish to use my Visa ___ or Master Card ___
 Number _____ Exp. date _____

___ I have enclosed a money order in the amount of \$ _____

If your application is approved and your background check is cleared, you will be notified. At that time you will be asked to submit the branch fee and the training fee.

The information on this application is submitted for the purpose of qualifying for a Freedom Bible College and Seminary (FBCS) Branch franchise. I hereby certify that the information is true, correct and complete to the best of my/our knowledge, and I/we understand and agree that any falsification of this data is grounds for FBCS refusing to grant me/us the franchise. I/we authorize FBCS to make whatever credit, and/or background investigation inquiries it deems necessary in connection

with my/our Branch application. This application shall become a part of the Branch Agreement entered into by the applicant(s) and FBCS. Applicant(s) acknowledge(s) that the information contained herein is relied upon by FBCS as true and that any misrepresentation later discovered shall be grounds to revoke the franchise.

By signing I (we) affirm that all information given in this application is true to the best of my knowledge.

Signatures

Applicant's Signature

Date

Applicant's Signature

Date

Affirmation of Commitment

By signing this application I affirm and acknowledge that all persons involved in the operation of this proposed branch will be expected to...

... uphold the standards of the Bible which is the only and true source of divinely written oracles of God.

... be true to the Christian faith.

... live a life before God and man that is exemplary of Christian service.

...live a life that will not bring reproach to Concepts of Freedom Ministries, Inc, Freedom Bible College and Seminary, Inc., Freedom Bible College & Seminary Branch System, Freedom Christian Ministries Association, Inc., Freedom Missions Relief, Inc., Joel Philip Church Ministries, Inc., or any other outreach or ministry of CFM.

...freely give permission to CFM to conduct a National Agency Check or other investigations as CFM deems necessary.

...acknowledge that the laws of the State of Arkansas, USA shall apply to all matters concerning the Proposed Branch

Signature _____ Date: _____

Signature _____ Date: _____

This application must be completed and signed before it will be processed. Do not leave blank spaces. Please call 800-494-7497 (U.S.A. Only) if you have questions.

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FBCS Use Only

Date Received: _____ Received by: _____

Background Check _____ Passed _____ Failed _____ Date _____

Approved: ____ Yes ____ No ____ Conditional

Conditions or Comments:

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