

Forms

Rio Grande Bible Institute & Missionary Language School

4300 S US Hwy 281

Edinburg, Texas 78539-9650

FAX: 956/380-8101

Language School Admissions

956/380-8144

E-Mail: admissions@riogrande.edu

Language School Application Checklist

Before sending in your Missionary Language School application, be sure that you have completed and enclosed the following:

- ALL information.
- A letter from your pastor, if you are being sent out by a church, or your mission director stating that you are under their mission board and that you will be accountable to them.
- Two prayer cards or two recent photos.
- The application fee of \$15 PER APPLICANT. If applying after the deadline, enclose \$20 per applicant. *All checks should be made payable to RGBI.*
- The housing application and correct housing deposit, if requesting campus housing.
- Transcripts from your high school for high school graduates only.
- Transcripts, sent to us from ALL schools you have attended since high school.

These items are very important for us to have in order to properly process your application. If your application is received but any of the above items are missing, your application will not be processed until everything is received.

These are your application forms. Please remove this entire section from the catalog when making application. Notice that the middle four pages are to be filled out by the spouse. Thank you.

Application

SENDING AGENCY

Mission or sending church: _____

Address: _____

Phone: () _____ FAX: () _____

E-mail address: _____

Person to whom progress reports should be sent: _____

In what country will you be serving? _____

In what area of ministry will you be serving? (*ie - church planting, teaching, etc.*) _____

CHURCH AFFILIATION

Denomination _____

Of what church are you a member? _____

Pastor's name _____

Address: _____

Phone: () _____ FAX: () _____

E-mail address: _____

APPLICANT

Applicant's full name: _____

Social Security Number: _____ - _____ - _____

Mailing address: _____

Home phone: () _____ FAX: () _____

E-mail address: _____

Other phone where you can be contacted () _____

Date of Birth Mo. _____ / Day _____ / Yr. _____ Country of birth _____

Country of citizenship _____

If not a United States citizen, what papers do you hold permitting you to reside in the U.S.A.?

Marital status (*Circle*): Single Married Widowed Engaged

If engaged, what is you fiancée's name? _____

Have you ever been divorced? * _____ If yes, have you ever remarried? * _____

* *If yes, please send an explanation on a different sheet of paper.*

Do you want to live in campus housing? Yes _____ No _____

To best know how to help you during language school, circle any of the following disabilities.

Blind Deaf Hard of hearing Dyslexic A.D.D. Other (*please explain*)

Do you have any health problems that might affect your ability to carry a full load of studies?

Do you plan to take a full load of studies, completing both semesters? _____ If not, please explain.

Please have your mission director send us a letter stating that he approves of you not taking a full load and/or not completing two semesters.

EDUCATION

Are you a high school graduate? _____ If no, highest grade completed: _____

Please send your high school transcripts. If you have attended other schools since high school, please list them below and **have them send us an official transcript.**

School Name	City/State	Graduated (Y/N)	Degree Received

Have you had any type of language instruction or experience? _____ If yes, in what language(s)?

FAMILY

Spouse's name: _____ Maiden name _____

Age _____ Date of Birth _____ Country of birth _____

Country of citizenship _____

If your spouse is not a United States citizen, what papers does he/she hold permitting him/her to reside in the U.S.A.? _____

Is your spouse applying to Language School Bible Institute? If neither, please explain and have your mission send us a letter stating that you have approval for only one person studying. _____

Please list all children living with you:

Name	M/F	Birth Date (M/D/Y)	Age	Country of Birth	Citizenship	Grade in School

How many children do you plan to enroll in our Day Care? _____

FINANCES

Will you have completed your deputation before arriving for language studies? Yes _____ No _____

How do you plan to pay for your expenses while at RGBI? (Circle) Savings Mission Pays Support

Other (Explain) _____

Note: Due to the study demands, time does not allow you to work off campus and study. You must have all your support raised before arriving. Full payment of tuition for the forth-coming semester is due and payable when you register for classes.

REFERENCES

Please supply us with 3 references:

Name	Phone	Relationship
_____	_____	_____
_____	_____	_____
_____	_____	_____

I/We plan to come in: Spring Fall of the year _____

Campus Housing Application

Rio Grande Bible Institute & Missionary Language School

Estimated Arrival:

- Fall of 20____ Spring of 20____

Sending Agency or church: _____

Applicant: _____

Spouse: _____

Children accompanying you:

Child's Name	Sex	Age

Housing Preference: *(see catalog for description of housing and costs)*

- I/We plan to arrange our own housing.
- I am single and plan to live in the dorm Private Shared
- We desire RGBI housing: *(Please prioritize those you would be willing to accept. Housing is normally assigned by family size.)*
 - _____ 2-bedroom apartment; block, 1-story with wall A/C unit; on campus
 - _____ 3-bedroom apartment; block, 1-story with wall A/C; on campus
 - _____ 3-bedroom apartment; block, 1-story with central air; on campus
 - _____ 3-bedroom, 2-story apartment; frame with central air; on campus

Health problems

Please explain any health problems that might require special needs for housing:

Deposit

Please enclose the proper deposit. No apartment will be assigned until the deposit has been received by our office. **Dorm: \$ 50.00 All apartments: \$300.00**

Spouse Application

APPLICANT

Applicant's full name: _____

Social Security Number: _____ - _____ - _____

Mailing address: _____

Home phone: () _____ FAX: () _____

E-mail address: _____

Other phone where you can be contacted () _____

Date of Birth Mo. _____ / Day _____ / Yr. _____ Country of birth _____

Country of citizenship _____

If not a United States citizen, what papers do you hold permitting you to reside in the U.S.A.?

To best know how to help you during language school, circle any of the following disabilities.

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Do you plan to take a full load of studies, completing both semesters? _____ If not, please explain.

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EDUCATION

Are you a high school graduate? _____ If no, highest grade completed: _____

Please send your high school transcripts. If you have attended other schools since high school, please list them below and **have them send us an official transcript.**

School Name	City/State	Graduated (Y/N)	Degree Received

Have you had any type of language instruction or experience? _____ If yes, in what language(s)?

REFERENCES

Please supply us with 3 references:

Name	Phone	Relationship
_____	_____	_____
_____	_____	_____
_____	_____	_____

I/We plan to come in: Spring Fall of the year _____

DOCTRINE AND TESTIMONY

Do you or anyone in your household use tobacco in any form? _____ Do you or anyone in your household use alcoholic beverages of any type? _____ If yes to either question, please explain:

Please note that as an organization we admit all students who hold to the position of salvation by faith alone in Jesus Christ. We are non-charismatic and ask that those holding to such practices please respect our position while on school property.

Please give us a brief testimony of your conversion to Christ: _____

I am in basic agreement with the doctrinal position of RGBI _____
Initial

Your signature below indicates you affirm that all statements contained in this application are true and accurate to the best of your knowledge. Any falsification or willful omission of pertinent information shall be cause for dismissal from the Missionary Language School program.

Applicant signature

Date

