



# Latin American Bible Institute of California

14209 Lomitas Ave, La Puente, CA 91746

(626) 968-1328

Labi.edu

## Admissions Checklist

Completed Application  
Application Fee (\$25.00)  
Pastoral Reference  
Educator Reference  
High School/GED/College Transcripts  
Personal Testimony/Ministry Experience

## Picture of Applicant

Please Attach Photo Here

## Application for Admissions

### Student Information

1. Name \_\_\_\_\_
2. Present Mailing Address \_\_\_\_\_
3. Permanent Address \_\_\_\_\_
4. Phone (\_\_\_\_) \_\_\_\_\_
5. Email Address \_\_\_\_\_
6. Birthday \_\_\_\_\_
7. Age \_\_\_\_\_ Gender (circle one)      Male    Female
8. Ethnicity (circle one)      Hispanic      Caucasian      Black  
Native American      Asian/Pac Islander  
Other \_\_\_\_\_
9. Marital Status \_\_\_\_\_
10. Country of Citizenship \_\_\_\_\_
11. Name of your High School \_\_\_\_\_
12. GPA \_\_\_\_\_ SAT/ACT Scores \_\_\_\_\_
13. If you have not take the SAT/ACT you will be required to take an entrance exam that measures your reading and writing proficiency. Do you understand that this is required for your application?      Yes or No

## Family Information

14. Name of Father or Legal Guardian (Mr. Rev. Dr.) \_\_\_\_\_
15. Name of Mother or Legal Guardian (Mrs. Rev. Dr.) \_\_\_\_\_
16. Father's Address: Number and Street \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_
17. Mother's Address: Number and Street \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_
18. Members or family who attended LABI \_\_\_\_\_  
\_\_\_\_\_

## Educational Background

19. All High schools, colleges, and professional schools I have attended beginning with the one last attended:
- School Name \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Dates Attended \_\_\_\_\_ to \_\_\_\_\_ Diploma or degree \_\_\_\_\_ GPA \_\_\_\_\_
- School Name \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Dates Attended \_\_\_\_\_ to \_\_\_\_\_ Diploma or degree \_\_\_\_\_ GPA \_\_\_\_\_
- School Name \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Dates Attended \_\_\_\_\_ to \_\_\_\_\_ Diploma or degree \_\_\_\_\_ GPA \_\_\_\_\_
20. I have been dismissed and/or placed on academic probation \_\_\_\_\_ If yes please explain \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
21. I have been placed on disciplinary probation \_\_\_\_\_ If yes please explain \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
22. I received the following honors/awards in high school/college \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## Campus Residency

- |   |        |
|---|--------|
| 23. I plan on living on campus  | YES NO |
| If so, please fill out health form                                    |        |
| 24. I plan on bringing a car to campus                                | YES NO |
| 25. I will need temporary stay for my family during registration week | YES NO |
| If so how many people _____ and for how many nights _____             |        |

*Please be aware that all booking must be confirmed in advanced by contacting the school at (626) 968-1328 or [info@labi.edu](mailto:info@labi.edu)*

## Future Plans

26. How did you hear about LABI? \_\_\_\_\_
27. The most important factor in my decision to apply for LABI was \_\_\_\_\_
28. After LABI I plan to:
- |  |        |
|--|--------|
| Pursue a ministerial credential/license            | YES NO |
| Serve at a local/home church                       | YES NO |
| Plant a church or work in a Christian organization | YES NO |
| Pursue higher education                            | YES NO |
| Work in the nonprofit sector                       | YES NO |

## Personal References

Each Applicant must have two references from persons who are familiar with the applicant's character and academic background. Please supply the information below for those to whom you will give your reference forms.

### 29. Pastoral Reference

Pastor's Name \_\_\_\_\_

Church's Address: Number and Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_ Phone Number (\_\_\_\_\_) \_\_\_\_\_

### 30. Educator Reference

Educator's Name \_\_\_\_\_

School or College Name \_\_\_\_\_

Address Number and Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_ Phone Number (\_\_\_\_\_) \_\_\_\_\_

# Personal Testimony and Ministry Experience

31. On a separate sheet of paper, 1-2 pages (typed, double-spaced, and 12 font) please narrate your testimony and why you believe LABI is the right Institute for you. Be sure to include any ministerial involvement that may have influenced your decision to apply.

**PLEASE ATTACH PERSONAL TESTIMONY & MINISTRY EXPERIENCE TO THIS APPLICATION**

## Statement of Agreement

**PLEASE READ CAREFULLY BEFORE SIGNING. READING AND SIGNING THIS AGREEMENT IS A CONDITION OF YOUR ADMISSION TO LABI**

LABI is committed to training men and women for full time ministry or lay service. Due to personal discipline and principles of accountability that are essential in the Christian walk, LABI seeks to provide students with the parameters which he or she is obliged to follow during the time the student is enrolled at LABI. The student's spiritual, emotional and physical well being is important. Required chapel services, dorm devotions and other small group meetings are facilitated to aid in spiritual development and growth.

The policies and regulations are in place that relate to the spiritual and social character of the campus environment. They are detailed for the student in the current copy of the Student Handbook. These include but are not limited to the following items: (1) attendance of chapel services (2) required weekly ministry team involvement and (3) daily on campus servant leadership.

In completion of my application, I have read the above statement and understand that acceptance into the Institute includes my commitment to be an exemplary student in my academics, spiritual life, servant leadership, and ministerial responsibilities. I certify to the best of my knowledge that all of the responses on this application are true and correct. If I am accepted as a student I agree to comply with the LABI standards and abide by all regulations of the Institute, both on and off campus as long as I am a student.

I have submitted my High School Transcript and/or College Transcripts? Yes  No   
I have written my High School GPA on this application? Yes  No   
I have written my SAT/ACT exam scores on this application? Yes  No   
If answered No to the previous question, I understand that I must take an entrance exam? Yes  No   
I have written my 1-2 pages typed personal Testimony & Ministerial Experience? Yes  No

Signature \_\_\_\_\_ Date \_\_\_\_\_

# Pastoral Reference

## TO BE COMPLETED BY THE STUDENT

1. Name of Student \_\_\_\_\_
2. Student's Permanent Mailing Address \_\_\_\_\_
3. Phone (\_\_\_\_) \_\_\_\_\_
4. Email Address \_\_\_\_\_
5. Student presently attends Church at \_\_\_\_\_
6. Pastor's Name \_\_\_\_\_
7. Church's Address: Number and Street \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_
8. I hereby release my right to examine this confidential Pastoral letter of reference, understanding that signing is not required as a condition for admissions.  
Signature \_\_\_\_\_ Date \_\_\_\_\_

## TO BE COMPLETED BY THE PASTOR

The above named person is applying to LABI and is asking you to provide a reference. After you have carefully answered all the questions, please mail this reference directly to the admissions office as soon as possible. Thank you for your time and effort in completing this form.

1. How long have you known the applicant \_\_\_\_\_
2. Has the applicant accepted Jesus Christ as his/her Savior and Lord? YES NO
3. Has the applicant lived a consistent Christian life? YES NO  
If NO please explain \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
4. How would you describe the applicant's Christian character?  
Excellent Good Fair Poor Unknown
5. Has the applicant been involved in Christian service? YES NO  
If yes, please give details: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
6. How do you characterize the applicant's leadership abilities:  
Excellent Good Fair Poor Unknown
7. What is your opinion of the social readiness of the applicant for college?  
Excellent Good Fair Poor Unknown



# Educator Reference

## TO BE COMPLETED BY THE APPLICANT

1. Student's Name \_\_\_\_\_
2. Student's Permanent Mailing Address \_\_\_\_\_
3. Phone (\_\_\_\_) \_\_\_\_\_
4. Email Address \_\_\_\_\_
5. Educator's Name \_\_\_\_\_
6. School or College Name \_\_\_\_\_  
Address Number and Street \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_
7. I hereby release my right to examine this confidential Educator letter of reference, understanding that signing is not required as a condition for admissions.  
Signature \_\_\_\_\_ Date \_\_\_\_\_

## TO BE COMPLETED BY THE EDUCATOR

The above named person is applying to LABI and is asking you to provide a reference. After you have carefully answered all the questions, please mail this reference directly to the admissions office as soon as possible. Thank you for your time and effort in completing this form.

1. How long have you known the applicant \_\_\_\_\_
2. Has the applicant accepted Jesus Christ as his/her Savior and Lord? YES NO
3. How do you characterize the applicant's leadership abilities:  
Excellent Good Fair Poor Unknown
4. How do you describe the applicant's academic readiness for college? Circle one:  
Excellent Good Fair Poor Unknown
5. What is your opinion of the social readiness of the applicant for college?  
Excellent Good Fair Poor Unknown
6. How does the applicant relate to his/her peer group?  
Admired Tolerated Avoided Rejected Unknown
7. How do you evaluate the applicant's cooperation:  
Excellent Good Fair Poor Unknown
8. How do you evaluate the applicant's level of responsibility?  
Excellent Good Fair Poor Unknown
9. How do you describe the applicant's emotional stability?  
Excellent Good Fair Poor Unknown
10. How do you evaluate the applicant's spiritual influence on his/her peers?  
Excellent Good Fair Poor Unknown

11. To the best of your knowledge, what are the applicant's strong qualities or abilities?

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12. As the Educator Reference, I

Highly Recommend

Recommend

Do Not Recommend the Applicant

Signature \_\_\_\_\_ Date \_\_\_\_\_

Print Name \_\_\_\_\_ Position \_\_\_\_\_

School Name \_\_\_\_\_

**PLEASE MAIL LETTER OF RECOMMENDATION TO  
ATT: ADMISSIONS AND RECRUITMENT DEPARTMENT  
14209 E. LOMITAS AVE, LA PUENTE, CA 91746**