



Biblical Seminary of the Philippines

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Preliminary Information Form (New Applicants)

Name (Last, First, Middle): _____ Gender: Male Female

Date of Birth (MM/DD/YY): ____/____/____ Place of Birth: (City) _____ (Country) _____

Marital Status: Single Married Widowed Separated/Divorced Nationality: _____

Current Address: _____

Permanent Address: _____

Email Address: _____ Cellphone #: _____

Church Membership: _____ Church Position: _____

Church Address: _____

Church Contact #: _____ Name of Church Pastor: _____

Denominational Affiliation: _____

College Degree: _____

College University: _____

How proficient are you with technology?

Low

High

Are you able to study on your own? Yes No

1

2

3

4

5

Will you be able to find a mentor or spiritual coach? Yes No

Course Preference

First Course Preferred: _____ Online Onsite

Second Course Preferred: _____ Online Onsite

Personal Testimony

Write a short testimony of your Christian Conversion

Mentor Information

Name of Mentor (Last, First, Middle): _____

Email Address: _____ Contact #: _____

Please Save this form as [Last Name][First Name]PIF.pdf (Sample: CruzJuanPIF.pdf) and send this to admissions@bsop.edu.ph