

Student Application Packet



KANSAS CITY COLLEGE & BIBLE SCHOOL



Checklist

The following requirements must be completed before a student can be granted full admission to KCCBS:

- Completely fill out the **Application for Admission**. Please use blue or black ink and print clearly.
- If possible, obtain a copy of your immunization record.
- Place the following items in an envelope and send them to the address listed in the box below:
 - Your completed **Application for Admission**.
 - Your immunization record (if it is available).
- Request that your high school transcripts and any college transcripts be sent directly to KCCBS. Transcripts for any current college course(s) should be sent upon completion. (You may use the Transcript Request Form in this packet for this purpose. Make as many copies as you need!)
- Give the references forms to appropriate individuals as instructed in the “To the Applicant” section of each of the forms.
- Request that your ACT or SAT scores be sent to KCCBS.

KCCBS Admissions Office
7401 Metcalf Avenue
Overland Park, KS 66204

KCCBS Test Score Codes

ACT – 1478

SAT – 5937

Questions?

Contact the KCCBS admissions office!

- Phone: (913) 722-0272, ext. 8738
- Email: admissions@kccbs.edu

Application for Admission

Legal Name: First _____ Middle _____ Last _____

Date of Birth ____/____/____ Place of Birth _____ Gender* Male Female

Social Security Number* ____-____-____ Phone Number (____) ____-____ Email _____

Current Address _____ (if temporary, valid until ____/____/____)

City _____ State _____ Zip Code _____ Country _____

State and County of Residency _____ How Long? _____

Marital Status: Single Married Widowed Divorced Separated (If divorced or separated, please send a letter of explanation.)

Name of Spouse (if applicable) _____

Names and Ages of Children (if applicable) _____

What is your racial designation?*† _____

Have you ever been convicted of a criminal offense (not a traffic violation)? Yes No (If yes, please explain below.)

When do you plan to enroll at KCCBS? Fall Spring 20 _____

Do you plan to be a full- or part-time student? Full-Time Part-Time

Have you previously enrolled at KCCBS? Yes No If yes, when? Fall Spring Year _____

Provide the following information about your next of kin:

Full Name(s) _____ Phone Number (____) ____-____

Street Address _____ Email _____

City _____ State _____ Zip Code _____ Country _____

Relationship to Student Parent(s) Guardian(s) Spouse Other _____

If you are an international student, please provide the following information:

Country of Citizenship _____

English Proficiency (TOEFL score or other satisfaction of requirement) _____

* Disclosure of your social security number and information about race and gender is voluntary.

† IRS Revenue Procedure 75-50 requires schools to keep records on the racial composition of the student body, faculty, and administrative staff for each academic year.

EDUCATION:

List the high school from which you graduated or anticipate graduating and any colleges that you have attended in chronological order.

School Name	Location (City, State)	Units Completed	Degree Earned	Dates Attended
			<input type="checkbox"/> High School Diploma <input type="checkbox"/> GED	

ACT Test Composite Score _____ Date of Test ____/____/____ High School Class Rank ____/____

Have you ever been dismissed from any school? Yes No (If yes, please explain below.)

CHRISTIAN CHARACTER:

Are you a Christian? Yes No

Please give a brief statement about your current spiritual condition and your plans and aspirations for the future.

Please give the names and addresses of the three people you asked to fill out your reference forms:

Academic/Professional _____
Pastor/Youth Pastor _____
Character Reference _____

MISCELLANEOUS INFORMATION:

How do you plan to pay school expenses? In full at enrollment Monthly payment plan PayPal

Are you a veteran of the U.S. armed forces? Yes No

Where do you plan to reside while enrolled at KCCBS?

- I plan to reside in the KCCBS dormitory.
- I plan to reside with my parents/relatives.
- I plan to find my own housing. (Married, local, or older students only.)

CERTIFICATION:

I certify that the information provided above is complete and correct to the best of my knowledge. I also pledge myself to abide by all the rules of the school concerning dress and conduct as presented in the Catalog and Handbook, or as may be formulated by the governing body. Signature _____ Date ____/____/____

Kansas City College and Bible School is committed to a policy of educational equity as it admits students, grants scholarships, and conducts all educational program activities and employment practices.

Academic/Professional Reference Form

To the Applicant:

Complete the top portion of this page and submit this form to a high school counselor, teacher, or principal. If you have not been enrolled in school for more than a year, give this form to an employer. Do not give this form to a relative. For the benefit of the respondent, please provide him or her with a stamped envelope addressed to the Kansas City College and Bible School Admissions Office (7401 Metcalf Avenue, Overland Park, KS 66204).

Applicant's Name _____ Email Address _____

Street Address _____ City _____ State _____ Zip Code _____

I willingly waive my right of access to this letter of reference once it is filed.

Signature _____ Date ____/____/____

To the Respondent:

The student named above is applying for admission to Kansas City College and Bible School and is asking you to supply information as to his or her academic ability and preparation for college work. KCCBS is a Christian institution with definite Christian goals. Our desire is to admit students who will profit the most from their enrollment here. The Admissions Committee finds candid, thorough evaluations invaluable in the decision-making process, so please be frank, fair, and accurate in your remarks and estimates. Please return this form directly to the school in the envelope provided by the student. Please do not return it to the applicant. If you have any questions, contact us by phone at (913) 722-0272 or by email at admissions@kccbs.edu. Thank you for taking time to give an evaluation.

How long have you known the applicant? _____ How well? slightly casually well

What is your relationship with the applicant? _____

Do you consider the applicant to be a sincere Christian? Yes No

Are you related to the applicant? Yes No

Do you recommend this applicant for admission?

Yes, with confidence!

Yes, with reservations (*explain below*).

No (*explain below*).

To your knowledge, has the applicant ever been convicted of a legal offense or been incarcerated? Yes No

To your knowledge, does the applicant drink alcoholic beverages, smoke, or take illegal drugs? Yes (*explain below*) No

Please rate the applicant by circling the category that best describes him or her.

COOPERATION Willingness to work with people in various capacities	Outstanding	When convenient	Indifferent	Unwilling	Not observed
EMOTIONAL STABILITY Reactions in various situations when stress is likely	Very stable	Fairly stable	Easily elated or depressed	Unresponsive	Not observed
INITIATIVE Ability to see things that need to be done—resourcefulness; assertiveness	Seeks additional tasks	Willingly does more than expected	Does assigned tasks	Needs prodding	Not observed
JUDGMENT AND COMMON SENSE Ability and foresight in decisions in everyday situations	Sound decisions	Fair deductions	Poor results	Lacks ability	Not observed
LEADERSHIP Ability to lead others	Consistently a leader	Usually a leader	Leads occasionally	Seldomly or never leads	Not observed
ACCEPTANCE BY OTHERS Mannerisms and appearance, general impression on others	Well liked	Accepted	Tolerated	Rejected	Not observed
RELIABILITY Dependability, willingness, and consistency	Conscientious	Usually reliable	Erratic	Unreliable	Not observed
INFLUENCE Consider both positive and negative influence on others	Unusually wholesome	Consistently good	Varying influence	Passive or negative	Not observed
COMMUNICATION SKILLS Ability to present thoughts with logic and clarity	Outstanding	Good	Has difficulty	Unable to communicate clearly	Not observed
WORK ETHIC Punctual, present, committed to goals, uses time well	Excellent	Good	Erratic	Has difficulty	Not observed
RESPECT FOR AUTHORITY Response to and attitude toward established authority	Unusually respectful	Good attitude	Indifferent to authority	Shows disrespect	Not observed

Signature _____ Date ____/____/____

Print Name _____

Name of Organization _____ Title _____

Street Address _____ City _____ State _____ Zip Code _____

Email Address _____

Pastor/Youth Pastor Reference Form

To the Applicant:

Complete the top portion of this page and submit this form to the pastor or youth pastor of your church. If you are related to your pastor and do not have a youth pastor, give this form to a church leader. Do not give this form to a relative. For the benefit of the respondent, please provide him or her with a stamped envelope addressed to the Kansas City College and Bible School Admissions Office (7401 Metcalf Avenue, Overland Park, KS 66204).

Applicant's Name _____ Email Address _____

Street Address _____ City _____ State _____ Zip Code _____

I willingly waive my right of access to this letter of reference once it is filed.

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How long have you known the applicant? _____ How well? slightly casually well

What is your relationship with the applicant? _____

Do you consider the applicant to be a sincere Christian? Yes No

Are the applicant's activities distinctly Christ-honoring? Yes No

Do you recommend this applicant for admission?

Yes, with confidence!

Yes, with reservations (*explain below*).

No (*explain below*).

Has the applicant been consistent in church attendance? Yes No

In what church activities has the applicant participated? _____

To your knowledge, has the applicant ever been convicted of a legal offense or been incarcerated? Yes No

To your knowledge, does the applicant drink alcoholic beverages, smoke, or take illegal drugs? Yes (*explain below*) No

Please rate the applicant by circling the category that best describes him or her.

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Signature _____ Date ____/____/____

Print Name _____

Name of Organization _____ Title _____

Street Address _____ City _____ State _____ Zip Code _____

Email Address _____

Character Reference Form

To the Applicant:

Complete the top portion of this page and submit this form to someone who knows you well. Do not give this form to a relative. For the benefit of the respondent, please provide him or her with a stamped envelope addressed to the Kansas City College and Bible School Admissions Office (7401 Metcalf Avenue, Overland Park, KS 66204).

Applicant's Name _____ Email Address _____

Street Address _____ City _____ State _____ Zip Code _____

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Yes, with confidence!

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No (*explain below*).

To your knowledge, has the applicant ever been convicted of a legal offense or been incarcerated? Yes No

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Please rate the applicant by circling the category that best describes him or her.

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Signature _____ Date ____/____/____

Print Name _____

Name of Organization _____ Title _____

Street Address _____ City _____ State _____ Zip Code _____

Email Address _____

Transcript Request Form

STUDENT INSTRUCTIONS

This form may be used to request that an official transcript be sent from your high school and/or any colleges or universities you have attended. Contact each academic institution for transcript fee and address information. Fill out and sign the form and send a copy to each institution. Make copies as needed. These official transcripts will then be sent directly to the KCCBS Office of Admissions.

ISSUING INSTITUTION INFORMATION:

Name of Institution _____

Location of Institution (City and State) _____

STUDENT INFORMATION:

Name (while attending) _____

Current Street Address _____

City _____ State _____ Zip Code _____

Primary Phone (____) ____ - ____ Email Address _____

Social Security Number ____ - ____ - ____ Birthdate ____ / ____ / ____

Date of Graduation or Last Date of Attendance ____ / ____ / ____

I hereby request that an official transcript be sent to:

Office of Admissions
Kansas City College and Bible School
7401 Metcalf Avenue
Overland Park, KS 66204
FAX: (913) 403-0595

Signature _____ Date ____ / ____ / ____