



## *Application for Enrollment*

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

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

### **Submission Options:**

Postal Mail: City of Hope Bible College  
New Hope Baptist Church  
561 Gilliam Rd., Greer, SC 29651  
email-nhbcgreer@gmail.com

Name \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ (County) \_\_\_\_\_ Zip \_\_\_\_\_

Telephone: (Day) (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Evening: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Social Security Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ D.O.B.: \_\_\_\_/\_\_\_\_/\_\_\_\_ Sex: \_\_\_\_\_

Email Address \_\_\_\_\_

Occupation: \_\_\_\_\_

Education: (please note highest education level obtained) \_\_\_\_\_

Last School attended: \_\_\_\_\_

Did you graduate:    yes    no            Year: \_\_\_\_\_

Have you received a GED in lieu of a diploma    Yes    No    Year: \_\_\_\_\_

Number of College Credits Completed: \_\_\_\_\_ College Degree \_\_\_\_\_ Certificate \_\_\_\_\_

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In which program are you enrolling?

\_\_\_\_ Certificate (specify) \_\_\_\_\_

Individual Course \_\_\_\_ Associate Degree \_\_\_\_ Bachelor's Degree \_\_\_\_ Not decided

\* If you plan to earn a higher degree, an Associate Degree is not required.

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**New Hope Baptist Church, 561 Gilliam Road, Greer, SC 29651, 864-879-7080**  
*Bishop Allen L. Bruton, Senior Pastor*

