

**NEPAL EBENEZER THEOLOGICAL SEMINARY**

*Accredited by Asia Theological Association*

Besi Gaun, Jorpati, Gokarneshwor – 6, GPO 8975, EPC  
1952, Kathmandu, Nepal, Phone: +97714915976,

Website: [www.netsnepal.org](http://www.netsnepal.org),  
Email: [nebcregistrar@gmail.com](mailto:nebcregistrar@gmail.com)



**Bachelor of Theology Application Form 2023-2024**

**1. PERSONAL PARTICULARS**

Name (as per your certificate): .....  
First Name / Middle Name / Family Name

Name in Devanagiri: .....  Male  Female

Your Country:..... State/Province: ..... District: .....

City/Village:..... Ward No.: ..... Street: .....

Date of Birth (in BS): ...../...../..... Date of Birth (in AD): ...../...../.....  
Day Month Year Day Month Year

Birth Place: ..... District: ..... Country: .....

Nationality: ..... Email: ..... Phone: .....

**2. FAMILY INFORMATION**

Father's Name: ..... Mother's Name: .....

Guardian's Contact Number: .....

Father's Occupation: ..... Approximate monthly income: .....

Mother's Occupation: ..... Approximate monthly income: .....

No of brothers: Elder: ..... Younger: ..... No of sisters: Elder: ..... Younger: .....

What is the nature of your family?  Joint family system  Nuclear family system

Marital Status:  Single  Married  Divorced  Widowed

Date of Marriage: ...../...../..... Spouse's Name: .....  
Day Month Year

Spouse's Occupation: ..... Approximate monthly income: .....

Does your family agree with your decision to study the Bible College?  Yes

Names of your children Sex Date of Birth

- a. ....
- b. ....
- c. ....



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Briefly write about (1) your purpose for wanting to do theological study, and (2) reasons to choose NEBC for theological study.

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## 6. MEDICAL FORM FOR APPLICANT

Name of the Applicant: \_\_\_\_\_  
Date of Birth: Date/ Month/ Year: \_\_\_\_\_ Gender: Male/ Female  
Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Marital Status: \_\_\_\_\_

### General

ENT: \_\_\_\_\_ Skin: \_\_\_\_\_  
Skeletal: \_\_\_\_\_ CVS: \_\_\_\_\_  
R.S.: \_\_\_\_\_ Abdomen: \_\_\_\_\_  
CNS: \_\_\_\_\_ Blood Pressure: \_\_\_\_\_

### Family History

Blood dyscrasia: \_\_\_\_\_ Diabetes: \_\_\_\_\_  
Hypertension: \_\_\_\_\_ Asthma: \_\_\_\_\_

### Medical History

Jaundice: \_\_\_\_\_ Operations: \_\_\_\_\_  
Epilepsy: \_\_\_\_\_ Long term treatment: \_\_\_\_\_  
Allergy to any drugs: \_\_\_\_\_  
Intolerance or allergy to any food: \_\_\_\_\_

### Laboratory Reports

Blood Group: \_\_\_\_\_ Rh Pos/ Neg.: \_\_\_\_\_  
Hemoglobin: \_\_\_\_\_ Serology: \_\_\_\_\_  
Urine: \_\_\_\_\_ Glucose Tolerance: \_\_\_\_\_  
Chest X-Ray/ Screen: \_\_\_\_\_

### Immunization (give dates):

Typhoid: \_\_\_\_\_ Tetanus: \_\_\_\_\_ Cholera: \_\_\_\_\_

### Past treatment and recommendation:

Is the applicant on any long term medication, or has been in the past? If so, please supply a medical report.

Medical Report attached: Yes/ No

Full Name of Doctor: \_\_\_\_\_

Reg. No: \_\_\_\_\_

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

Date: \_\_\_\_\_ Signature of Doctor with stamp: \_\_\_\_\_

**7. FINANCIAL INFORMATION (For details please see Page No. 6)**

Mode of Payment (tick one):  Monthly  Bimonthly  Quarterly  Half Yearly  
 Annually

Name of the person/church/organization sponsoring: .....

Address: .....

Phone: ..... Email: .....

Seal/Signature and date of the person/church/organization sponsoring: .....

**BEFORE DECLARATION**

**Note Please:** There won't be any compromise with any of the above mentioned particulars. Follow detail as stated.

**DECLARATION**

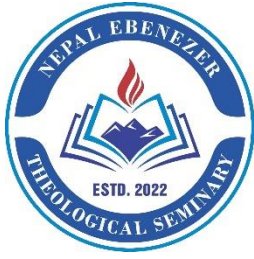
Hereby, I declare the above information is true to the best of my knowledge. I fully agree to abide by the guide of conduct and rules of the school if I get admission in the college.

.....  
Applicant's Signature

.....  
Date (in AD)

**Please complete this Application Form and send/submit to:**

The Dean of Academics, Mobile: 9823585460  
Basin Gaun, Jorpati, Gokarneshwor – 6  
GPO 8975, EPC 1952, Kathmandu, Nepal  
Email: [nebc.academics@gmail.com](mailto:nebc.academics@gmail.com)



# NEPAL EBENEZER BIBLE COLLEGE

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## FEE STRUCTURE FOR BTH (IN NEPALESE RUPEES) 2023-2024


UNSUBSIDISED MONTHLY FEE	SUBSIDISED MONTHLY FEE

## FINANCIAL GUARANTEE LETTER

Hereby I/we initiate to pay NPR ..... per month for Mr/Mrs/Miss .....  
 ....., the member of .....  
 church for his/her full three years B.Th. studies. I/we will pay the fee in advance:  Monthly  
 Bimonthly  Quarterly  Half Yearly  Annually

Name of the person/church/organization sponsoring: .....

Address: .....

Phone: ..... Email: .....

Alternative Phone/Mobile: .....

Seal/Signature/Date of the person/church/organization sponsoring: .....



## NEPAL EBENEZER THEOLOGICAL SEMINARY

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### PASTOR'S REFERENCE FORM

#### TO THE APPLICANT OF BACHALOR OF THEOLOGY

Dear Applicant,

Please fill your name and forward this form to your pastor for completion. The form should be completed by your pastor and sealed in the envelope provided and sent along with the application form.

Name of the applicant: .....

#### TO THE LOCAL CHURCH PASTOR/LEADER AS REFEREE

Dear Pastor,

NEBC exists to glorify God by preparing the men and women of God for servant leadership in Nepali churches, by building servant leaders who have passion for God firmly grounded on the Scriptures and equipped with practical skills needed for an effective ministry. Therefore, we would greatly appreciate your taking time to fill this form as objectively as possible. Kindly seal it in the envelope provided and return it to the applicant. Your evaluation of the applicant will be kept strictly confidential. Thanks for your partnership in the Gospel.

1. How long have you known the applicant? .....

2. Is the applicant related to you?  Yes       No

If yes, in what relationship? .....

If no, then in what capacity have you known the applicant? .....

3. How would you rate the applicant's competence in the following areas? (Indicate your assessment by circling the appropriate numbers):

#	Assessment Areas	Excellent	Good	Average	Below Average	Poor
a.	Ability to work with others	5	4	3	2	1
b.	Spiritual Maturity	5	4	3	2	1
c.	Ability to study in English	5	4	3	2	1
d.	Sense of Responsibility	5	4	3	2	1
e.	Willingness to learn	5	4	3	2	1
f.	Attitude to authority	5	4	3	2	1
g.	Christian Character/Testimony	5	4	3	2	1
h.	Willingness to help others	5	4	3	2	1
i.	Leadership ability	5	4	3	2	1
j.	Involvement in Ministry	5	4	3	2	1

4. Does he/she have any health problems that would hinder his/her studies at NEBC (keeping in mind the hard work and emotional pressure which the applicant will face)?  Yes  No  
If yes, specify it .....

5. In your estimate, what are the strengths and weaknesses in the applicant's personality and character? .....

6. In your opinion, what areas of the applicant's life would need special attention here at NEBC? .....

7. How is your church going to participate in the training of the applicant for future ministry? .....

8. Please tick one of the following before signing your name:

I strongly recommend the above applicant.

I recommend with some reservation.

I do not recommend.

Please furnish the following information about yourself:

Name: .....

Designation/Position: .....

Village/Town/City... Street:..... Province: .....

District: ..... Post Box: ..... Country: .....

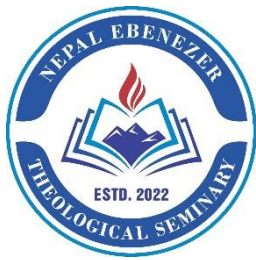
Mobile Phone (with ISD code): .....

Land Phone (with STD/ISD code): ..... Personal Email: .....

Official Email (if applicable): .....

Signature: ..... Date: .....





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### GENERAL REFERENCE FORM 1

#### TO THE APPLICANT OF BACHALOR OF THEOLOGY

Dear Applicant,

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Name of the applicant: .....

#### TO A CHRISTIAN LEADER AS REFEREE

Dear Sir/Madam,

NEBC exists to glorify God by preparing the men and women of God for servant leadership in Nepali churches, by building servant leaders who have zeal for God firmly grounded on the Scriptures and equipped with practical skills needed for an effective ministry. Therefore, we would greatly appreciate your taking time to fill in this form as objectively as possible. Kindly seal it in the envelope provided and return it to the applicant. Your evaluation of the applicant will be kept strictly confidential. Thanks for your partnership in the gospel.

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c.	Ability to study in English	5	4	3	2	1
d.	Sense of Responsibility	5	4	3	2	1
e.	Willingness to learn	5	4	3	2	1
f.	Attitude to authority	5	4	3	2	1
g.	Christian Character/Testimony	5	4	3	2	1
h.	Willingness to help others	5	4	3	2	1
i.	Leadership ability	5	4	3	2	1
j.	Involvement in Ministry	5	4	3	2	1

4. Does he/she have any health problems that would hinder his/her studies at NEBC (keeping in mind the hard work and emotional pressure which the applicant will face)?  Yes  No  
If yes, specify it .....

5. In your estimate, what are the strengths and weaknesses in the applicant's personality and character? .....

6. In your opinion, what areas of the applicant's life would need special attention here at NEBC? .....

7. How is your church going to participate in the training of the applicant for future ministry? .....

8. Please tick one of the following before signing your name:

I strongly recommend the above applicant.

I recommend with some reservation.

I do not recommend.

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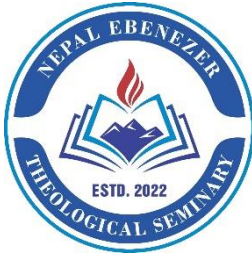
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### GENERAL REFERENCE FORM 2

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