



*application for admission*

# APPLICATION INSTRUCTIONS

Please read and complete all portions of this application package. If you have any difficulties understanding any part of the application, please call Ecola Bible School for help.

## 1. Submit this admissions application package together with:

- A. A non-refundable application fee of \$35.00  
(The application fee for married couples is \$50 per couple)
- B. A recent photo of yourself.

## 2. The application package includes:

- A. Application and autobiography forms.
- B. A health form to be returned with the application.
- C. Three reference forms. These should be completed and returned to us directly by the referee.
  - 1. Your pastor or youth pastor
  - 2. A deacon, elder, or Sunday school teacher
  - 3. A school teacher or employer.

**Note: Please sign the waiver on each reference form.**

- D. A list of requirements, rules, and policies that will govern student conduct. By signing this application, the applicant is agreeing to live by (or: obey) these guidelines.

**Note:** *Each applicant should possess a current school catalog. Along with a Statement of Faith, the catalog includes further information on school policies.*

## 3. Send all items to:

Director of Admissions  
Ecola Bible School  
P.O. Box 190  
Cannon Beach, OR 97110-0190

Telephone :1-888-436-2552

(503) 436-2552

Fax: (503) 436-9756



## D. Employment History

12. List last three employers, beginning with the most recent, type of work, and tenure:

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## E. Leadership, Awards, and Involvement

13. List special school, community, and church activities:

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14. What has given you the greatest sense of accomplishment in your life so far?

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## F. Church Affiliation

15. What church do you attend regularly? \_\_\_\_\_

Are you a member?    No    Yes   How long have you attended? \_\_\_\_\_

Church Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ Denomination: \_\_\_\_\_

Senior Pastor: \_\_\_\_\_ Youth Pastor: \_\_\_\_\_

## G. How you became acquainted with Ecola Bible School:

16. Where did you first hear about Ecola?

Family member    Friend    Internet    Church    Camp    Festival    Other \_\_\_\_\_

17. Where did you get the most valuable information about Ecola?

Internet    Catalog    Friend    Family member    Other \_\_\_\_\_

18. What was the greatest influence in your decision to apply?

Location    Program    Friends    Family    Other \_\_\_\_\_

Comments: \_\_\_\_\_

## H. Acknowledgment of Responsibility

19. I have read and agree to abide by the rules and policies stated in the Ecola Catalog and in this Application Packet.

\_\_\_\_\_  
*(student signature)*

\_\_\_\_\_  
*(date)*

20. I have no history as a sexual offender, and I give Ecola Bible School permission to do a criminal background check on me (required for processing).

\_\_\_\_\_  
*(student signature)*

\_\_\_\_\_  
*(date)*



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### Autobiographical Sketch

Name:  Mr.  Mrs.  Ms.

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*(last name)*

*(first & middle names)*

*(name used)*

1. Specifically, why do you wish to attend Ecola Bible School?

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2. What are your special interests and hobbies?

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3. Please describe your family and home life. If married, please tell us about your marriage and family.

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4. Please comment on the area of your life where you feel you need to grow the most.

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### **Applicant Medical Form**

Name:  Mr.  Mrs.  Ms.

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*(last name)* *(first & middle names)* *(name used)*

***If you answer YES to anything below, please provide complete information on the back of this sheet.***

Have you had:

- 1. Serious allergic reaction (food, drugs, etc.) To what? \_\_\_\_\_  Yes  No  
 Please list specific drug reactions: \_\_\_\_\_  
 (Use back if necessary)
- 2. Convulsive reaction or lapses of consciousness  Yes  No
- 3. Heart trouble  Yes  No
- 4. Respiratory problems  Yes  No
- 5. Diabetes  Yes  No
- 6. Broken bone  Yes  No
- 7. Headaches, migraines  Yes  No
- 8. Major surgery  Yes  No
- 9. Serious injury  Yes  No
- 10. Severe menstrual cramping  Yes  No
- 11. Other recurring disorders or health problems  Yes  No
- 12. Anything that might restrict physical activity or work assignments  Yes  No
- 13. Drug or alcohol abuse  Yes  No
- 14. Do you presently take medication prescribed by a doctor  Yes  No
- 15. The medical coverage I will have while at Ecola: \_\_\_\_\_  
*(group and / or policy number)*

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*(company name)* *(address)*

If you know of a serious health condition, please provide the name and phone number of the physician most familiar with the situation, whom we or emergency caregivers can contact in case of a medical emergency.

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**To be filled out by the Student:**

The statements contained in this reference will be kept confidential. We request that you sign the waiver below, allowing your evaluator greater freedom in responding.

I, \_\_\_\_\_  
(Please print or type your full name)  
 voluntarily waive my right of access to see this recommendation.

\_\_\_\_\_

(signature)

\_\_\_\_\_

(date)

**Confidential Personal Reference from your Pastor**

**To the Referee:**

How long have you known the applicant? \_\_\_\_\_

In what capacity? \_\_\_\_\_

**Please circle the characterizations which best apply to the applicant:**

1. MOTIVATION	Purposeless	Vacillating	Usually Purposeful	Effectively Motivated	Highly Motivated
2. WORK ETHIC	Seldom Works even Under Pressure	Needs Constant Pressure	Needs Occasional Prodding	Prepares Assigned Work Regularly	Seeks Additional Work
3. INITIATIVE	Merely Conforms	Seldom Initiates	Frequently Initiates	Consistently Self-Reliant	Actively Creative
4. LEADERSHIP	Passive	Cooperative but Retiring	Sometimes in Minor Affairs	Contributing in Important Affairs	Judgement Respected, Makes Things Go
5. CONCERN FOR OTHERS	Indifferent	Self-Centered	Somewhat Socially Concerned	Generally Concerned	Deeply and Actively Concerned
6. RESPONSIBILITY	Unreliable	Somewhat Dependable	Usually Dependable	Conscientious	Assumes Responsibility
7. INTEGRITY	Not Dependable	Questionable	Generally Honest	Reliable, Dependable	Consistently Trustworthy
8. SPIRITUAL CONCERN	Apathetic	Curious	Desires a Vital Faith	Excited, Sincere	Vital and Growing
9. SOCIAL ACCEPTABILITY	Avoided	Tolerated	Liked	Well-Liked	Sought Out
10. EMOTIONAL STABILITY	Hyperemotional, Apathetic	Excitable, Unresponsive	Usually Well-Balanced	Well-Balanced	Exceptionally Stable
11. TEACHABILITY	Resists Learning, Unteachable	Disinterested	Usually Teachable	Interested in Learning	Eager, Active Learner
12. SOCIAL INTERACTION	Withdrawn	Quiet but polite	Friendly	Outgoing	Very Outgoing

13. In order for us to best meet the needs of the applicant, are there discipline, criminal or social/emotional issues you feel we should be aware of?

Yes  No (If yes, please explain) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

14. Ecola's community standards require students to abstain from alcohol, tobacco, and drugs. Do you know any reason why this might be a problem for the applicant?

Yes  No (If yes, please explain) \_\_\_\_\_  
\_\_\_\_\_

15. Please comment on the applicant's attitude toward authority and rules: \_\_\_\_\_  
\_\_\_\_\_

16. Ecola is a one year intensive Bible study and discipleship program designed to enable those who attend to see real growth, knowledge, and life change in a relatively short period of time. The most important factor in the success of a student at Ecola is readiness to attend. In this case, readiness would be indicated by a sincere desire to grow as a Christian, to study God's Word, and to apply it to daily living. Students need a heart that is open to spiritual truth and a willingness to live, study, and fellowship in a Christian community, and to be governed by its rules.

With this in view, in your opinion, how ready is the applicant to attend Ecola?

Perfect candidate  Mostly there  Somewhat ready  Probably not ready yet

17. Your recommendation for this person to attend Ecola is:

Highly recommended  Recommended  Recommended with reservations  Do not recommend

18. Your name (Please print): \_\_\_\_\_

Address: \_\_\_\_\_  
(address)

Phone: \_\_\_\_\_

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

19. Are you currently receiving Ecola literature?  Yes  No

If not, would you like to receive Ecola literature?  Yes  No

20. **Please mail this form directly to:** Office of Director, Ecola Bible School, P.O. Box 190, Cannon Beach, OR 97110-0190.

(Note: This form will be kept in confidence and will not be reviewed by the applicant.)



**To be filled out by the Student:**

The statements contained in this reference will be kept confidential. We request that you sign the waiver below, allowing your evaluator greater freedom in responding.

I, \_\_\_\_\_  
(Please print or type your full name)  
 voluntarily waive my right of access to see this recommendation.

\_\_\_\_\_

(signature)

\_\_\_\_\_

(date)

**Confidential Personal Reference from a Church Leader**

**To the Referee:**

How long have you known the applicant? \_\_\_\_\_

In what capacity? \_\_\_\_\_

**Please circle the characterizations which best apply to the applicant:**

1. MOTIVATION	Purposeless	Vacillating	Usually Purposeful	Effectively Motivated	Highly Motivated
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Yes  No (If yes, please explain) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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Yes  No (If yes, please explain) \_\_\_\_\_  
\_\_\_\_\_

15. Please comment on the applicant's attitude toward authority and rules: \_\_\_\_\_  
\_\_\_\_\_

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18. Your name (Please print): \_\_\_\_\_

Address: \_\_\_\_\_  
(address)

Phone: \_\_\_\_\_

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

19. Are you currently receiving Ecola literature?  Yes  No

If not, would you like to receive Ecola literature?  Yes  No

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**To be filled out by the Student:**

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I, \_\_\_\_\_  
(Please print or type your full name)  
 voluntarily waive my right of access to see this recommendation.

\_\_\_\_\_

(signature)

\_\_\_\_\_

(date)

**Confidential Personal Reference from a Teacher/Employer**

**To the Referee:**

How long have you known the applicant? \_\_\_\_\_

In what capacity? \_\_\_\_\_

**Please circle the characterizations which best apply to the applicant:**

1. MOTIVATION	Purposeless	Vacillating	Usually Purposeful	Effectively Motivated	Highly Motivated
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## REQUIREMENTS, RULES, AND POLICIES

Ecola is a community of Christians seeking to grow in conformity to the character of Jesus Christ. No community can exist without guidelines. The following are the minimum requirements for a student to remain enrolled in our program. It is assumed that those who desire to attend the school are in agreement with the aim and purpose of Ecola and desire to apply themselves to the study and application for which this institution exists. Students who attend are expected to maintain the high moral standards of the Scriptures.

### A. General

1. While a high school diploma is not required, the minimum age for attendance at Ecola is 18 years.
2. Medical coverage for students attending is strongly advised. Ecola has no medical treatment facilities and does not supply student medical insurance. Students will be required to sign a medical waiver form if they do not have medical insurance.
3. The use of illegal drugs, marijuana, alcohol, and tobacco or any kind of smoking paraphernalia is not allowed on or off campus. Those using these substances should not apply for admission.
4. Any applicant convicted of a felony will not be allowed to attend Ecola until at least one year from the end of their parole and/or probation.

### B. Classroom

5. Class attendance on time is expected. The primary reason for Ecola's existence is the teaching received in class, therefore all students are required to be in class except for illness or excused absence.
6. Dress in the classroom should be in good taste. Modesty and consideration for others is the general rule. Students should also consider the Christian atmosphere of the campus and be appropriately dressed outside of class.
7. Drinks are permitted in the classroom, but they must be in spill-proof containers.

### C. Dormitory

8. Students must be 20 yrs. old to live off campus.
9. Women are not allowed in men's dorms, and men are not allowed in women's dorms. The only exception is during a designated open house each term. Disregard of this rule will result in automatic expulsion.
10. Curfew is enforced. Students are to be in their dormitories by 12:00 a.m., Sunday through Thursday, and by 1:00 a.m., Friday and Saturday.

11. Courtesy hours begin at 10:00 p.m. Students are expected to be quiet in consideration of those who wish to sleep or study.
12. Students are to sign out if leaving the campus after the evening class and are expected to return by curfew.
13. Students under 21 are to receive permission for overnight absences from the dormitory supervisor and appropriate dean. Permission will be granted at the school's discretion.
14. Music equipment must be used with courtesy. During business hours, music must be kept very low as the dormitories are located over offices and conference facilities. Music should be selected in harmony with Philippians 4:8 and the selections and volume should not be offensive to others. Headphones are encouraged.
15. Televisions, VCRs, DVD players, projectors, weight training equipment, weapons, microwaves, and other kitchen appliances are not allowed.

### D. Vehicles

16. Vehicles must be registered with the Ecola office and parked only in designated areas.
17. Bicycles are not allowed in dormitory rooms or other Ecola buildings, except for the designated bicycle storage area.

### E. Refunds

18. When a student leaves Ecola, whether for voluntary or punitive reasons, within the first three weeks, one-half of room, board, tuition, and facilities fees will be refunded. Between three and five weeks, one-quarter will be refunded and if more than five weeks of the term have passed, no money will be refunded.
19. If discounts have been taken for early payment, those amounts will be subtracted from the refund.



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