School of Biblical Studies
bible@ovu.edu
bible.ovu.edu

1 Campus View Drive, Vienna, WV 26105-8000

Declaration of Formal Bible Study

PERSONAL INFORMATION:

Name: _____ Date: ____/____ /____
Last First Middle

Home Address (Street or PO Box): _____

City: _____ State: _____ Zip: _____

Home Phone: (_____) _____ Email: _____

Campus Address (or Box Number): _____

City: _____ State: _____ Zip: _____

Campus Phone (or extension): (_____) _____

Major: _____Minor(s) (if any): _____

CHURCH ATTENDENCE:

Home Congregation: _____

Congregation attended while a student at OVU: _____

Reference from that congregation: _____

Phone: (_____) _____

BIBLE/MINISTRY DECLARATION:

☐ Bachelor of Arts in Bible and Ministry: _____ Hours completed: _____

☐ Bachelor of Science in Bible and Ministry: _____ Hours completed: _____

☐ Second Major in Vocational Bible and Ministry—Ministry Track: _ Hours completed: _____

☐ Second Major in Vocational Bible and Ministry—Missions Track: _ Hours completed: _____

☐ Second Major in Vocational Bible and Ministry—Bible Teaching: _ Hours completed: _____

☐ Biblical Studies or Ministry Minor: _____ Hours completed: _____

☐ Certificate Program in Bible/Ministry: _____ Hours completed: _____

Student Signature: _____ Date: ____/____ /____

Advisor Signature: _____ Date: ____/____ /____

Dean's Signature: _____ Date: ____/____ /____