



## **GOSPEL GARDEN BIBLE COLLEGE**

958 Tiekunu, Ndeiya, Limuru, Kenya

P.O. Box 1343-00217 Limuru

Tel: 0713-511369, 0722-230727, 0723-129776

Email: [ggbckenya95@gmail.com](mailto:ggbckenya95@gmail.com) website: [www.ggbckenya.ac.ke](http://www.ggbckenya.ac.ke) (on working)

### **APPLICATION FOR ADMISSION**

#### **Instructions**

The applicants must complete the application form for program admission, and all accompanying documentation, in English. Before accepted can be given, all questions on the form must be answered and all the following additional documents must be received;

- Copy of secondary school leaving certificate and transcript
- Academic Transcript for Diploma
- Application fee of KES 500 for Kenyan; US \$10 for foreigners
- Two recent (2"x2") pictures to be attached to the application form
- Three complete confidential reference forms (See attached forms)
- Letter(s) from supporting institutions or persons providing financial support (See attached form)
- Biographical information and personal statement of purpose and faith (See attached form)
- A complete medical form with chest x-ray result (See attached form)

The GGBC Admission Committee will send the notification of acceptance.

All requirements must be completed by the following date: \_\_\_\_\_



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Please attach  
your recent  
picture here  
(2"x2")

### Application for program admission

*For advanced Diploma ( ) Bachelor of Theology ( )*

#### I. PERSONAL INFORMATION (please type or print)

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

Title	Last	first	Maiden/Middle
Physical Address _____			
Mailing Address _____			
Date of Birth _____	Place of Birth _____	Gender _____	Nationality _____
Phone: Home _____	Office _____	Cell _____	E-mail _____
Civil status (check appropriate one) ( ) Single ( ) Married ( ) Widow/Widower ( ) Separated			
If married, name of spouse _____		Phone No. _____	
Name and Ages of Children _____			
Languages spoken fluently _____			
Contact person in case of emergency _____		Phone No. of contact person _____	
Address of Contact Person _____			

#### II. EDUCATION INFORMATION

List below the degree/s you have received after graduation from high school:

Institution	Location	Degree Received	Date Graduated
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Is your college DECS / CHED accredited \_\_\_\_\_ if yes, what is your SO # \_\_\_\_\_

Have you applied to Gospel Garden Bible College previously? \_\_\_\_\_ When? \_\_\_\_\_

Who or what influenced your decision to apply to Gospel Garden Bible College? \_\_\_\_\_

Have you been dismissed or denied admission by any other seminaries? \_\_\_\_\_ if yes, please explain on a separate sheet.

Are you transferring from another institution? \_\_\_\_\_ if so, you must have a letter from the current seminary indicating "student in good standing" status.

### III. FINANCIAL PLANNING

How do you plan to meet your expenses while at GGBC? \_\_\_\_\_  
\_\_\_\_\_

Are you currently in debt or financially committed? Yes ( ) if yes, please explain \_\_\_\_\_  
\_\_\_\_\_

### IV. CHURCH INFORMATION

#### Present Church

Name of the church & address \_\_\_\_\_  
Name of Pastor \_\_\_\_\_ Denominational affiliation \_\_\_\_\_  
How long have you been attending? \_\_\_\_\_ Regular? ( ) Sporadically ( )  
Member? ( ) Significant involvement? ( ) Minimal involvement? ( )

#### Home Church if different from present church

Name of church & address \_\_\_\_\_  
Name of Pastor \_\_\_\_\_ Denominational affiliation \_\_\_\_\_  
How long have you been attending? \_\_\_\_\_ Regular? ( ) Sporadically ( )  
Member? ( ) Significant involvement? ( ) Minimal involvement? ( )

Are you ( ) licensed ( ) Ordained? If yes, which denomination? \_\_\_\_\_

### V. CHRISTIAN MINISTRY EXPERIENCE (Church minister, Para-church staff, Missionary, Sunday school teacher, etc.)

Church organization	Title/ Position	Job Description	Dates (Fr/To)
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

### VI. REFERENCES

Give the name, complete addresses & phone numbers of three reliable references who have known you for some time. (Pastor, Former Teacher or Church leader, and Christian Friend)

1. Pastor \_\_\_\_\_ Home/ Office Phone Nos. \_\_\_\_\_  
Home/ Office Address \_\_\_\_\_  
E-mail Address \_\_\_\_\_ Cell Phone No \_\_\_\_\_
2. Christian Friend \_\_\_\_\_ Home/ Office Phone Nos. \_\_\_\_\_  
Home/ Office Address \_\_\_\_\_  
E-mail Address \_\_\_\_\_ Cell Phone No \_\_\_\_\_
3. Former Teacher/ Church Leader \_\_\_\_\_ Home/ Office Phone Nos. \_\_\_\_\_  
Home/ Office Address \_\_\_\_\_  
E-mail Address \_\_\_\_\_ Cell Phone No \_\_\_\_\_

## VII. FOR FOREIGN APPLICATION

What type of visa do you have? \_\_\_\_\_ Do you need pupil's pass from GGBC? Yes \_\_\_\_\_ No \_\_\_\_\_  
PASSPORT No: \_\_\_\_\_ Date \_\_\_\_\_ Expire Date \_\_\_\_\_  
Name of guardian while in Kenya \_\_\_\_\_ Relationship \_\_\_\_\_  
Address \_\_\_\_\_  
Home / Office Phone No. \_\_\_\_\_ E-mail Address \_\_\_\_\_

I will abide by the policies and regulation of GGBC.

\_\_\_\_\_  
Signature of Application / Student

\_\_\_\_\_  
Date

### For Office Use

( ) Application Fee \_\_\_\_\_  
( ) Official Transcripts from \_\_\_\_\_ ( ) Picture ( ) Personal statement of Faith  
( ) Certificate of Financial Support` ( ) Permission / Recommendation Letter  
Referrals: ( ) Pastor ( ) Teacher / Church Leader ( ) Friend

Date of Admission \_\_\_\_\_

Identification # \_\_\_\_\_



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### Confidential Reference: Pastor

The Admissions Office would appreciate an evaluation from you concerning the person named below. Your honesty will help us in doing a careful evaluation. We shall keep information strictly confidential. Please mail this to the registrar immediately upon completion. Thank you for your assistance.

To be completed by the applicants:			Date _____
Name of applicants _____			
Last		First	Maiden/Middle
Address _____			
Street Name		City	Telephone
Degree program applied for ( ) Advance Diploma ( ) Bachelor of Theology Year applied for _____			

1. How long have you known the applicants? \_\_\_\_\_ Years \_\_\_\_\_ months
2. How well do you know the applicant and in what context? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
3. What evidence does the applicant show of being truly converted? \_\_\_\_\_  
\_\_\_\_\_
4. What circumstances to your knowledge led the applicant to devote his/her life to Christian service? \_\_\_\_\_  
\_\_\_\_\_
5. What is the applicant's reputation with the opposite sex? \_\_\_\_\_  
\_\_\_\_\_
6. What factors in his family that will help or hinder the applicant's success at GGBC? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
7. How does the applicant respond to authority? \_\_\_\_\_  
\_\_\_\_\_

**8. For this section, please check the comments that describe the applicant.**

<b>Spiritual life</b>	Show growth & Christian Lifestyle	average Spirituality	small evidence of spiritual growth	No interest in spiritual growth	Do not know
<b>Christian Commitment</b>	Exemplary	Obvious to others	Underdeveloped in	Questionable	Do not know
<b>Church Involvement</b>	Serves in Leadership	Serves in some ministries	Attends frequently	Attends occasionally	Do not know
<b>Purposefulness</b>	Self-directed	Average potential	Vacillating in Purpose	Appears aimless	Do not know
<b>Initiative</b>	Show good Initiative	Average Initiative	Responds only when asked	Acts only when no one volunteers	Do not know
<b>Industry</b>	Exceeds what is required	Performs assigned tasks	Needs prodding	Overextends himself	Do not know
<b>Leadership</b>	Dynamic Leader	Assumes occasional Leadership successfully	Tries, but not a natural leader	Tends to be a follower	Do not know
<b>Communication Skills</b>	Articulate, effective Communicator	Communicates satisfactory	Needs improvement	Poor communicator	Do not know
<b>Responsibility</b>	Always reliable	Dependable	Usually reliable	Irresponsible	Do not know
<b>Reason &amp; Decision Making Ability</b>	Insightful, Thinks	Prefers to rely on	Impetuous, acts	Disregards sound	Do not know
<b>Emotional Maturity</b>	Healthy appraisal Of self	Demonstrates emotional stability	Insecure, poor self image	Prone to anger/ depression	Do not know
<b>Interpersonal Relationship</b>	Gets along well With others	Tolerated by others	Withdrawn, avoid others	Difficulty in maintaining relationship	Do not know
<b>Sensitivity to Others</b>	Compassionate, Caring	Indifferent to the feelings of others	Arrogant	Disregards the needs of others	Do not know
<b>Ability to Work With others</b>	Works well with Others	Intimidated in group setting	Dominates in group setting	Intolerant of others	Do not know

**9. To the best of your knowledge, has the applicant ever:**

- a) Been convicted of a felony? ☐ Yes ☐ No ☐ Unable to comment  
Comment \_\_\_\_\_
- b) Engage in sexual misconduct in the past? ☐ Yes ☐ No ☐ Unable to comment  
Comment \_\_\_\_\_
- c) Been treated for substance abuse/addiction? ☐ Yes ☐ No ☐ Unable to comment  
\_\_\_\_\_

**10. What degree of success in graduate school would you predict for the applicant?**

☐ Will excel ☐ above average ☐ Average ☐ below average

**11. In considering the applicant's suitability for seminary study and overall potential for ministry, please check one:**

☐ highly recommended ☐ recommend ☐ do not recommend ☐ recommend with this reservation:  
\_\_\_\_\_

Name (print) \_\_\_\_\_ Signature \_\_\_\_\_

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

Title / Position \_\_\_\_\_ Date \_\_\_\_\_

Name & Address of Church or Organization: \_\_\_\_\_

\_\_\_\_\_ Phone \_\_\_\_\_



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### Confidential Reference: Teacher or Church Leader

The Admissions Office would appreciate an evaluation from you concerning the person named below. Your honesty will help us in doing a careful evaluation. We shall keep information strictly confidential. Please mail this to the registrar immediately upon completion. Thank you for your assistance.

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Name of applicants _____			
Last		First	Maiden/Middle
Address _____			
Street Name		City	Telephone
Degree program applied for ( ) Advance Diploma ( ) Bachelor of Theology Year applied for _____			

8. How long have you known the applicants? \_\_\_\_\_ Years \_\_\_\_\_ months
9. How well do you know the applicant and in what context? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
10. What evidence does the applicant show of being truly converted? \_\_\_\_\_  
\_\_\_\_\_
11. What circumstances to your knowledge led the applicant to devote his/her life to Christian service? \_\_\_\_\_  
\_\_\_\_\_
12. What is the applicant's reputation with the opposite sex? \_\_\_\_\_  
\_\_\_\_\_
13. What factors in his family that will help or hinder the applicant's success at GGBC? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
14. How does the applicant respond to authority? \_\_\_\_\_  
\_\_\_\_\_



**8. For this section, please check the comments that describe the applicant.**

<b>Spiritual life</b>	Show growth & Christian Lifestyle	average Spirituality	small evidence of spiritual growth	No interest in spiritual growth	Do not know
<b>Christian Commitment</b>	Exemplary	Obvious to others	Underdeveloped in	Questionable	Do not know
<b>Church Involvement</b>	Serves in Leadership	Serves in some ministries	Attends frequently	Attends occasionally	Do not know
<b>Purposefulness</b>	Self-directed	Average potential	Vacillating in Purpose	Appears aimless	Do not know
<b>Initiative</b>	Show good Initiative	Average Initiative	Responds only when asked	Acts only when no one volunteers	Do not know
<b>Industry</b>	Exceeds what is required	Performs assigned tasks	Needs prodding	Overextends himself	Do not know
<b>Leadership</b>	Dynamic Leader	Assumes occasional Leadership successfully	Tries, but not a natural leader	Tends to be a follower	Do not know
<b>Communication Skills</b>	Articulate, effective Communicator	Communicates satisfactory	Needs improvement	Poor communicator	Do not know
<b>Responsibility</b>	Always reliable	Dependable	Usually reliable	Irresponsible	Do not know
<b>Reason &amp; Decision Making Ability</b>	Insightful, Thinks	Prefers to rely on	Impetuous, acts	disregards sound	Do not know
<b>Emotional Maturity</b>	Healthy appraisal Of self	Demonstrates emotional stability	Insecure, poor self image	Prone to anger/ depression	Do not know
<b>Interpersonal Relationship</b>	Gets along well With others	Tolerated by others	Withdrawn, avoid others	Difficulty in main-training relationship	Do not know
<b>Sensitivity to Others</b>	Compassionate, Caring	Indifferent to the feelings of others	Arrogant	Disregards the needs of others	Do not know
<b>Ability to Work With others</b>	Works well with Others	Intimidated in group setting	Dominates in group setting	Intolerant of others	Do not know

**9. To the best of your knowledge, has the applicant ever:**

d) Been convicted of a felony? ☐ Yes ☐ No ☐ Unable to comment  
Comment \_\_\_\_\_

e) Engage in sexual misconduct in the past? ☐ Yes ☐ No ☐ Unable to comment  
Comment \_\_\_\_\_

f) Been treated for substance abuse/addiction? ☐ Yes ☐ No ☐ Unable to comment  
\_\_\_\_\_

**10. What degree of success in graduate school would you predict for the applicant?**

☐ Will excel ☐ above average ☐ Average ☐ below average

**11. In considering the applicant's suitability for seminary study and overall potential for ministry, please check one:**

☐ highly recommended ☐ recommend ☐ do not recommend ☐ recommend with this reservation:

\_\_\_\_\_

Name (print) \_\_\_\_\_ Signature \_\_\_\_\_

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

Title / Position \_\_\_\_\_ Date \_\_\_\_\_

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### Confidential Reference: Christian Friend

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16. How well do you know the applicant and in what context? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

17. What evidence does the applicant show of being truly converted? \_\_\_\_\_

\_\_\_\_\_

18. What circumstances to your knowledge led the applicant to devote his/her life to Christian service? \_\_\_\_\_

\_\_\_\_\_

19. What is the applicant's reputation with the opposite sex? \_\_\_\_\_

\_\_\_\_\_

20. What factors in his family that will help or hinder the applicant's success at GGBC? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

21. How does the applicant respond to authority? \_\_\_\_\_

\_\_\_\_\_

## 8. For this section, please check the comments that describe the applicant.

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<b>Christian Commitment</b>	Exemplary	Obvious to others	Underdeveloped in	Questionable	Do not know
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**12. To the best of your knowledge, has the applicant ever:**

g) Been convicted of a felony? ☐ Yes ☐ No ☐ Unable to comment  
Comment \_\_\_\_\_

h) Engage in sexual misconduct in the past? ☐ Yes ☐ No ☐ Unable to comment  
Comment \_\_\_\_\_

i) Been treated for substance abuse/addiction? ☐ Yes ☐ No ☐ Unable to comment  
\_\_\_\_\_

**13. What degree of success in graduate school would you predict for the applicant?**

☐ Will excel ☐ above average ☐ Average ☐ below average

**14. In considering the applicant's suitability for seminary study and overall potential for ministry, please check one:**

☐ highly recommended ☐ recommend ☐ do not recommend ☐ recommend with this reservation:

\_\_\_\_\_

Name (print) \_\_\_\_\_ Signature \_\_\_\_\_

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

Title / Position \_\_\_\_\_ Date \_\_\_\_\_

Name & Address of Church or Organization: \_\_\_\_\_

\_\_\_\_\_ Phone \_\_\_\_\_



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### FINANCIAL STATEMENT BY SPONSOR

To the Sponsor: Please refer to the financial of AGS and discuss this with the applicant before completing and signing this statement. Please return the complete form to the applicant or mail it directly to the Registrar's Office at the address above.

1. Name of Applicant: \_\_\_\_\_
2. Name of Sponsor (Organization or Individual): \_\_\_\_\_
3. On behalf of the applicant, I am prepared to pay to GGBC the following fees and expenses (please include specific amounts)

i.	Tuition for advance Diploma students	Full Scholarship	For 3 years
ii.	Tuition for Bachelor of Theology students	KES 5,600/=	per course
iii.	Books and others study expenses	Depends on course	
iv.	Dormitory for Advance Diploma students	KES 3,000/=	per term
	Dormitory for Bachelor of Theology students	KES 1,500/=	per week (Monday to Friday)

Sponsor's Signature: \_\_\_\_\_

Sponsor's position and contact information (address, fax, e-mail):

\_\_\_\_\_  
\_\_\_\_\_

If you would like GGBC to bill you directly, please indicate which items you would like to be billed for and the name and address of the person the bill should be sent to:

\_\_\_\_\_  
\_\_\_\_\_

Email: [ggbckenya95@gmail.com](mailto:ggbckenya95@gmail.com) website: [www.ggbckenya.ac.ke](http://www.ggbckenya.ac.ke) (on working)

## BIOGRAPHICAL INFORMATION

***[Please type or write legibly]***

1. Briefly describe your family background [early family life, siblings, and significant features of your current family life].
2. Describe your spiritual journey [the beginnings of your spiritual awareness, your relationship with God, your commitment to Christ, a past or present spiritual struggle and area of recent growth or challenge].

3. Describe your ministry / employment experiences since graduation from secondary school, indicating employer, location and length of time at each. [Include what you enjoyed most in your ministry / work and what particular spiritual gifts were utilized,]

4. Share three strengths in your personal character and three areas where you need growth.



5. State your reasons for applying to Gospel Garden Bible College (include in your explanation the program to which you are applying and why you felt that program is best suited to your education and spiritual goals.)
6. What are your personal life-goals and desire, and how do you anticipate your GGBC experience could assist you in journey toward achieving these?
7. GGBC is not an academic for higher learning, but a community of Christian as well. If admitted, in what way do you think you can contribute toward the building up (i.e. edifying, encouraging or supporting) of the GGBC community.



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### **PERSONAL STATEMENT OF FAITH**

Please describe in your own words what you believe to be essentials of the Christian Faith or provide your personal doctrinal statement. Be sure to include your perspective on the significance of Jesus Christ, the authority of the Scripture and the path of salvation.



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### MEDICAL INFORMATION

It is in the applicant's own interest to complete this form as honestly and as accurately as possible.  
Please type or print legibly all information.

Portion to be completed by the applicant:

Full name \_\_\_\_\_ Date of Birth \_\_\_\_\_  
Sex \_\_\_\_\_ Status \_\_\_\_\_ Number and ages of children \_\_\_\_\_

#### **Medical history of the applicant**

1. Do you have any physical deformities or limitations? If so, please specify.

\_\_\_\_\_  
\_\_\_\_\_

2. If He/she suffers from any of the following, please underline:

Poor vision	Allergies	Frequent diarrhea
Eye strain	Shortness of breath	frequent constipation
Poor hearing	Asthma	Muscle or bone pain
Noises in ear	Bronchitis	Insomnia
Frequent headaches	Palpitation of the heart	Frequent urination
Nose bleeds	Food intolerance	Dysmenorrheal
Bleeding gums	Indigestion	

List any illness you had (including surgery, diabetes, heart trouble, seizures, venereal disease, and tuberculoses)

\_\_\_\_\_  
\_\_\_\_\_

Are you allergic to any drugs \_\_\_\_\_ if so, which? \_\_\_\_\_

Are you taking long-term drugs \_\_\_\_\_ which? \_\_\_\_\_

**Signature:** \_\_\_\_\_