

GLOBAL TRAUMA RECOVERY INSTITUTE

Trainee Application – Current BTS Student Version*

Date:

*If you are a current BTS student you can complete this application.

| APPLICANT INFORMATION | | | |
|---|----------------------------------|------------------|-----|
| Last Name | First | M.I. | ID# |
| Street Address | | Apartment/Unit # | |
| City | State | ZIP | |
| Phone | E-mail Address | | |
| SS# (Required) _____-_____-_____ | Religious Affiliation (optional) | | |
| Ethnic Origin (optional) ___ American Indian or Alaska Native ___ Asian ___ Black/African American ___ Hispanic /Latino ___ White ___ Native Hawaiian or Other Pacific Islander ___ Nonresident Alien ___ Race & Ethnicity Unknown ___ Two or more races | | | |

| ATTACHMENTS TO BE SENT WITH THIS APPLICATION |
|--|
| 1. Description of clinical theoretical orientation |
| 2. List of trainings and nature of clinical experience with trauma; Explanation of reason for applying to GTRI |
| 3. Registration form |
| 4. Trainee Consent Form |

| DISCLAIMER AND SIGNATURE |
|---|
| I certify that my answers are true and complete to the best of my knowledge. I understand that false or misleading information in my application or interview may result in my release. My signature below acknowledges that I have received and consent to the trainee informed consent. |
| I wish to be considered for the following: (Check all that apply) |
| <input type="checkbox"/> Online courses only |
| <input type="checkbox"/> Online and on campus courses |
| <input type="checkbox"/> Immersion experiences (Needs approval from Director after successful completion of 3 online course & On Campus Intensive) |
| Signature _____ Date _____ |

Please submit all forms via email to admissions@biblical.edu
<http://www.biblical.edu/>