

**PERKINS SCHOOL OF THEOLOGY
STUDENT COURSE REQUEST**

SMU ID# _____ SMU Email _____ Other email _____ Jan Term, 2011

NAME _____ Spouse _____
Last First Middle Name

Local Address _____ Home ph. _____
street city state zip

Perm. Address _____ Work ph. _____
street city state zip Cell ph.

Denomination _____ Annual Conf.(UMC) _____ Expected Grad. Date _____
month year

Degree: M.Div. C.M.M. M.S.M. M.T.S. None UMC Deacon Track
 Certificate Programs: Hispanic Studies Urban Ministry Women's Studies Pastoral Care
 Anglican Studies African American Studies

U.S. Citizens and Permanent Residents ONLY:

Check your racial/ethnic category American Indian or Alaskan Native
 Asian or Pacific Islander Black, Non-Hispanic Hispanic White, Non-Hispanic
 List your country of citizenship if not U.S. _____

Non-Immigrants ONLY:

List your visa status and your country of citizenship _____

COURSE REQUESTS:

X	Catalog Number and Course Title	Instructor	Hours
	BB 8345. Scripture and Christian Ethics	Clark-Soles	3
	HX 8360. Studies in Wesley	Bemis	3
	PC 7321. The Caring Congregation	Dobbs-Wiggins	3
	BB 8321. The Bible in Global Context: Reding the New Testament in the Indian Context	Wan	3
	WX 8321. Christian Mission in Cultural Context: Southern Spain and Abrahamic Religions	Boon	3
	HR 8037. Seminarians: Sharing Our Faith Traditions: Love and Law: A Model of InterfaithFriendship	Hun	3

Advisor Signature _____ DATE _____

I understand that this is an official registration. I agree to notify the Office of the Perkins Registrar in writing if I decide to cancel my registration for the term indicated.

Student Signature _____ DATE _____

**DO NOT REGISTER ONLINE: SUBMIT THIS FORM TO THE REGISTRAR IN 206 KIRBY.
PAYMENT DUE DATE IS DECEMBER 20th.**