

Spring 2014 Perkins School of Theology Satellite Course of Study School at McMurry University, Abilene, Texas.

Course Registration for part-time Local Pastors.

Registration closes January 13, 2014

Please take care to complete this form (on both sides), printing or typing your information. Persons cannot be considered registered until all information is supplied, required signatures are obtained, and all appropriate fees are submitted by January 13, 2014. **Include a portrait photo of yourself.**

Last name _____	First name _____	Middle name _____
STUDENT ID: _____ or SSN: _____ - _____ - _____		Date of birth _____
Home address _____	City and State _____	Zip _____
Preferred name for name tag _____		
Home phone (include area codes) _____	Work phone _____	Cell Phone _____
Annual Conference _____	Ethnicity (not required) _____	

Email address _____ Alt. email address _____

Emergency contact (name and phone): _____
Name Phone

Have you ever taken courses at the Perkins Regional Course of Study School? Yes ...No

Have you ever taken any courses at a Regional or Extension Course of Study School? (other than Perkins)..... Yes ...No
 If yes, include your up to date transcript from GBHEM. Contact Pamela Fulton at 615.340.7416, pfulton@gbhem.org.

Position: Full-time Local Pastors are not eligible to attend this Satellite School

- Part-time Local pastor Student Local Pastor Associate Member Provisional Member

I have received: High school diploma GED

I have completed:

- Some undergraduate work (list school and hours completed)
 School: _____ Hours: _____
- Undergraduate degree from (school) _____
- Some graduate work (list school and hours completed)
 School: _____ Hours: _____
- Graduate degree from (school): _____
- Some seminary work (list school and hours completed)
 School: _____ Hours: _____
- Seminary degree from (school): _____ Hours: _____

SPRING SESSION 2014: Classes meet Saturdays, February 1, March 8, and April 12 from 8:30 a.m. to 5:15 p.m.

Pre-class work is due by January 24, 2014 11:59:59 (if you are using Locker.SMU)

Initial	Course #	Title
	411	Hebrew Bible II, Dr. John B. F. Miller (jbmiller@mcm.edu)

After obtaining all required signatures,
 send this form with fees to:
 Course of Study School Satellite
 PO Box 750133
 Dallas TX 75275-0133

OFFICE USE ONLY Date registration received _____

Check # _____ Amount: _____

Fees due _____ Balance due _____

ROL Received _____ Hold _____

