**Course of Study School**

 **Wesley Theological Seminary**

**Weekend School 2018 Spring**

**March 16-17 & April 20-21**

Registration deadline January 15, 2018

**Please Note:** All Weekend Courses will be held on the main campus for Wesley Theological Seminary. Class size will be limited to 20 students. The course will be cancelled if we do not have a minimum of 6 students by the registration deadline. Location, directions and pre-course assignment are available on-line.

**Registration Form**

**Instructions**: Please complete this form, obtain the required signatures and **enclosed a $75.00 registration fee for each course.** Send to: Sara Sheppard, COS Registrar, Wesley Theological Seminary, 4500 Massachusetts Avenue, NW, Washington, DC , 20016.

**PERSONAL INFORMATION\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

FULLNAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ WTS Student ID (if known) \_\_\_\_\_\_\_\_\_\_\_\_\_

 First M.I. Last

SSN: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Is this a new Address? Yes 🞎 No 🞎**

CITY, STATE, ZIP: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-MAIL: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

TELEPHONE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_home \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ cell

EDUCATION: High School College Hours Completed \_\_\_\_ Degree(s) Awarded: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Please list all degrees earned)

 **I am a Local Pastor** (complete appointment information below) **I am a Certificate for Christian Studies Student**

**APPOINTMENT INFORMATION: Please indicate current conference**

Annual Conference: **(circle one)** BW EPA WPA GNJ NY Upper NY Susquehanna

 New England VA WV Pen-Del Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I am appointed: Full time Part time No appointment at this time

Name of the Church: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(COS students who have completed licensing school but are not appointed to a congregation may attend the COS for one year without an appointment. The following year you must be under appointment to attend classes)

**COURSE REGISTRATION**

**Instructions:** Please indicate which course you are registering for. You may register for one course at a time in the Weekend Program. Registration deadline February10, 2017 .

**March 16-17 & April 20-21, 2018**

□ **CS-224 Administration and Polity** □ **CS-321 Bible 3: Gospels**

□ **CS-422** **Theological Heritage 4: Wesleyan Movement** □ **CS-524 Practice of Ministry**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**For Wesley Seminary use only :**

Date received :\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Registration fee received: \_\_\_\_\_\_\_\_\_\_\_\_ Conference support: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ WTS ID: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**HOUSING NEEDS: please indicate whether or not you will need housing for this program:**

**□ Yes, I need housing provided by Wesley Seminary. □ No, I will make my own arrangements or commute**

**□ I have contacted the Seminary for on-campus housing. from home.**

**□ Please include me in the room block at the hotel for Friday night.**

**□ I need housing Thursday night too.**

**EMERGENCY CONTACT**: Please list the name and phone number of the person you wish to have contacted in case of emergency.

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

Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ please circle one: Home Cell Work

Relationship: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**REQUIRED SIGNITURES: (This form will be returned to the student if either of these signatures is missing.)**

**STUDENT SIGNATURE:** I give authorization for my records at WTS to be reported to the Division of Ordained Ministry and my Conference and/or District Board of Ordained Ministry.

 Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**CONFERENCE REGISTRAR SIGNATURE:** The above referenced Local Pastor is to attend Wesley Theological Seminary Course of Study Weekend School 2017-2018.

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_ e-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

We offer a scholarship for local pastors to attend Weekend Course of Study School. Yes No

**DISTRICT SUPERINTENDENT SIGNATURE:** This Local Pastor is authorized by my District to attend Wesley Theological Seminary Course of Study Weekend School 2017-2018.

 Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_ e-mail \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 District: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**COSTS:**

Registration Fee: $75.00 non-refundable due for each course with registration application.

Tuition: $350.00 per course; payable the first day of class or earlier.

Housing: approx. $129.00 + taxes/night at the Courtyard Marriott Chevy Chase\*. (Check website for actual rates)

\*Reservations must be made through the seminary. Please complete the housing information above and return to Sara Sheppard. You will receive a confirmation number via e-mail.

**Students are responsible for housing costs. Meals will be on your own.**

**Attendance Policy: Students must attend all 20 hours of class-time to receive credit for the course. Assignments must be turned in on time. Cancellations must be received in writing no less than one week before the course. Cancellations less than one week will be charged tuition for the course.**