Course of Study School Wesley Theological Seminary

Weekend School 2016 Spring March 11-12 & April 22-23, 2016

Registration deadline February 12, 2016

<u>Please Note:</u> 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

<u>Instructions</u>: 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) M.I. Last				
SSN:	DATE OF BIRTH:				
ADDRESS:		Is this a new Addre	ess? Yes 🗆 No 🗆		
CITY, STATE, ZIP:		E-MAIL:			
TELEPHONE:	home		cell		
EDUCATION: High School [College Hours Completed	Degree(s) Awarded: _	(Please list all degrees earned)		
APPOINTMENT INFORMATIO	N: Please indi	cate current conference	(
Annual Conference: (circle o	,	d WPA GNJ NY d VA WV Pen-Del	Upper NY Susquehanna Other:		
I am appointed: Full time Name of the Church:	Part time	No appointm	ent at this time \square		
(COS students who have completed licen appointment. The following year you mus			attend the COS for one year without a		
	COURSE RE	GISTRATION			
Instructions: Please indicate which co Program. Registration deadline Febru		for. You may register for o	one course at a time in the Weekend		
	March 11-12 & .	April 22-23, 2016			
☐ CS-121 Bible 1: Intr	oduction \square C	S-222 Theological Heri	itage 2: Early Church		
□ CS-323 C	ongregational Care	□ CS-523 I	Evangelism		
For Wesley Seminary use only:					

Date received:	Registration fee received:	Conference support:				
Student Name:		WTS ID:				
HOUSING NEEDS: p	lease indicate whether or not you w	ill need housing for	this program:			
☐ I have contacted the S	provided by Wesley Seminary. Seminary for on-campus housing. the room block at the hotel for Frida sday night too.	from hor		gements or commute		
case of emergency.	ACT: Please list the name and pho	ne number of the p	erson you wish t	o have contacted in		
Phone:	please circ		Cell	Work		
REQUIRED SIGNITU	<u>URES</u> : (This form will be returned to t	he student if either of	these signatures is	s missing.)		
	RE: I give authorization for my recreased and/or District Board of Ord		reported to the I	Division of Ordained		
Signature:		Date:				
	ISTRAR SIGNATURE: The above ady Weekend School 2015-2016.	referenced Local F	Pastor is to attend	l Wesley Theological		
Name:		Phone Number:				
Signature:		Date:	e-mail:			
We offer a	a scholarship for local pastors to attend	Weekend Course of	Study School. Ye	es No		
DISTRICT SUPERINT	TENDENT SIGNATURE: This Lo	ocal Pastor is author	rized by my Distr	rict to attend Wesley		
Theological Seminary C	Course of Study Weekend School 20	15-2016.				
Name:		Phone Number	er:			
Signature:		Date:	e-mail			
District:						
COSTS: Registration Fee: \$75.00) non-refundable due for each cours	se with registration :	application.			
<u>Tuition:</u> \$350.00 per co	ourse; payable the first day of class of	or earlier.				
*Res	res/night at the Courtyard Marriott eservations must be made through the ve and return to Sara Sheppard. Yo	ie seminary. Please				

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

<u>Attendance Policy:</u> 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.