

Course of Study School | Wesley Theological Seminary Registration Form | Summer Term COS School 2019

Registration deadline **April 1, 2019**

Instructions: Please complete this form, obtain the required signatures and **enclosed a \$35.00 registration fee for each course.** Return all three pages 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

PREFERRED NAME FOR NAMETAG: _____ (nickname or First Name)

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)

COURSE REGISTRATION

Instructions: If you are attending one 2-week term, register for 2 classes; if you are attending two 2-week terms, register for 4 classes. Please be mindful of the class times – AM or PM.

Term 1 : July 8 – 18, 2019	✓	Term 2 : July 22 – August 1, 2019	✓
CS-122 Theology Heritage 1: Introduction AM		CS-121 Bible 1: Introduction AM	
CS-124 Transformational Leadership PM		CS-123 Formation and Discipleship PM	
CS-221 Bible 2: Torah and Israel's History AM		CS-223 Worship and Sacraments AM	
CS-222 Theological Heritage 2: Early Church PM		CS-224 Administration and Polity PM	
CS-322 Theological Heritage 3: Medieval-Reformation AM		CS-324 Preaching AM	
CS-321 Bible 3: Gospels PM		CS-323 Congregational Care PM	
CS-421 Bible 4: Prophets, Psalms and Wisdom Literature AM		CS-423 Mission AM	
CS-424 Ethics PM		CS-422 Theological Heritage 4: Wesleyan Movement PM	
CS-522 Theology in the Contemporary Church AM		CS-523 Evangelism AM	
CS-524 Theological Reflection: Practice of Ministry PM		CS-521 Bible 5: Acts, Epistles & Revelation PM	

For Wesley Seminary use only:

Date received: _____ Registration fee received: _____ Notes: _____

Name: _____ Gender: Male Female DOB: _____

This is my first year attending Course of Study at Wesley Yes No

I expect to graduate in 2019 Yes No

Please select one:

Yes! I need housing assigned through Wesley.

I do not need housing or the meal plan.

No, I do not need housing and will arrange my own.

I do not need housing but would like meal plan.

REQUEST FOR ACCOMODATIONS - Please answer the two questions below. We will assign housing as requested to the best of our ability. Students will be notified of housing assignment in early June. **Students taking housing are automatically enrolled in the meal plan.**

1. Choose one housing option:

On-campus New Residence Hall

On-campus Straughn Hall

Off Campus Hotel

Double room: roommate preference: _____

Single room

2. Please answer the following to assist us in room assignments:

I use a PAP machine at night

I am a smoker

I have trouble with stairs or mobility issues. (new doctor's note required each year)

REQUIRED:

Arrival date in DC: _____, 2019

End of term departure date: _____, 2019

Please list below any physical conditions we should be aware of: This would include, diabetes, heart ailments and allergies; physical limitations such as use of scooters, wheelchairs or other mobility issues. We can only help you if you tell us. **Please provide as much information as possible.** _____

REQUIRED SIGNATURES: Note: This form will be returned to the student if any of the signatures are missing.

STUDENT SIGNATURE:

I give authorization for my records from WTS to be reported to the Division of Ordained Ministry and my Conference and/or District Board of Ordained Ministry. **I understand that I am responsible for paying 100% of my housing and meal costs to Wesley Theological Seminary.**

Signature: _____ Date: _____
(typed or signed)

CONFERENCE REGISTRAR SIGNATURE:

**** Conference Scholarships are to be awarded directly to the student.****

The above referenced Local Pastor is authorized by _____ Conference to attend Wesley Theological Seminary Course of Study School 2013.

Name: _____ Phone Number: _____

Signature: _____ Date: _____ e-mail: _____
(typed or signed)

DISTRICT SUPERINTENDENT SIGNATURE: This Local Pastor is authorized by my District to attend Wesley Theological Seminary Course of Study School 2013.

Name: _____ Phone Number: _____

Signature: _____ Date: _____ e-mail _____
(typed or signed)

District: _____

Course of Study School
Wesley Theological Seminary
Term I: July 8 – 18, 2019 | Term II: July 22 – August 1, 2019

Student Name: _____

WTS ID: _____

APPOINTMENT INFORMATION:

Please indicate current conference

Annual Conference: 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
(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)

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

Name: _____

Phone: _____ Home Cell Work

Relationship: _____

SPECIAL DIETARY NEEDS: Please note all students who stay in Wesley Seminary housing **must** take the meal plan.

This is a seminary policy. I do not have special dietary needs I DO have special needs as outlined below:

CANCELLATION POLICY:

Cancellation of course registration and/or housing must be received no later than June 1st in writing.

Students canceling after June 1st will be held responsible for one night's housing costs. **Non-attendance does not constitute a cancellation. No shows will be billed for housing.**

I have read and understand the cancellation policy for the Course of Study School at Wesley Theological Seminary.

Print Name: _____

Signature: _____
(typed or signed)

Date: _____

COSTS:

Tuition: \$0* Wesley Theological Seminary does not charge tuition for Basic Summer COS classes. Students are responsible for registration fee, housing & meals (if applicable) and a facilities fee.

Registration Fee: \$35.00 non-refundable fee **per course** due with registration application.

Housing: Please refer to website for housing costs. These will be published by March 1.

Facilities Fee: \$100.00 per term

Wesley COS contact info:

Sara Sheppard, Managing Director, COS	202-885-8688	ssheppard@wesleyseminary.edu
Wesley billing office	202-885-8662	businessoffice@wesleyseminary.edu
GBHEM Registrar in Nashville, TN	615-340-7416	cosregistration@gbhem.org
COS Website		www.wesleyseminary.edu/course-of-study-current-students/