Instructions

1. Please print to complete this form.
2. Complete all sections.
3. Obtain the required signatures.
4. Enclose the $100 registration fee. Your registration cannot be processed without the fee.
5. Send to the Saint Paul Course of Study Office.

Personal Information

First name______________________________________________
Preferred name________________________________________
Last name______________________________________________
Home phone____________________________________________
Work phone____________________________________________
Cell phone______________________________________________
Email__________________________________________________
Mailing address__________________________________________
City ________________________ State ______ Zip _________
Date of birth____________________________________________
Sex: Female ____ Male ____ Ethnicity (optional): ____________
SSN: __________________________________________________

(First Year Student or Student new to Saint Paul)

Professional Information

Annual Conference_______________________________________
District__________________________________________________
Are you currently under appointment? _____ Yes _____ No
Check one: Full-time Local Pastor _____
Part-time Local Pastor _____
Name of church(es) you presently serve ________________
Mentor’s name__________________________________________
Address________________________________________________
City ________________________ State ______ Zip _________
Years of education you have completed____________________
Degrees completed______________________________________
Course of Study work completed
___ Year 1  ___ Year 2  ___ Year 3  ___ Year 4  ___ Year 5
Please list other Course of Study Schools you have attended
________________________________________________________________
Notify in case of emergency ______________________________
Emergency Phone________________________________________

Fees:

Fall and Spring Extended Courses for Part-time Local Pastors:
Non-refundable registration fee: $100 per class
Tuition: $200 per class

Winter and Summer Sessions for Full-time Local Pastors:
Non-refundable registration fee: $100 per class
Tuition: $200 per class
**Enrollment:** Please check one course in each box in which you would like to enroll for each session. Please refer to the Course of Study website for a listing of Course Goals, Advance Assignments and Book Lists.

**Spring 2015 – Greater Kansas City Area**

Spring 2015 Extended Course for Part-time Local Pastors: **March 13-14 and April 10-11, 2015**

- 224 Administration & Polity
- 324 Preaching
- 323 Congregational Care
- 424 Ethics
- 524 Theol. Reflection – Practice of Ministry

*Registration deadline is Dec. 15, 2014
Advance Assignments post to MOODLE by Feb. 6, 2015*

**2015 Winter Session:** **January 5-16, 2015** – *Please select only one course per week:*

<table>
<thead>
<tr>
<th>January 5-9, 2015</th>
<th>January 12-16, 2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>221 Bible II: Torah and Israel’s History</td>
<td>421 Bible IV: Prophets, Psalms &amp; Wisdom Lit.</td>
</tr>
<tr>
<td>222 Theol. Heritage II: Early Church</td>
<td>223 Worship and Sacraments</td>
</tr>
<tr>
<td>422 Theol. Heritage IV: Wesleyan Movement</td>
<td>423 Mission</td>
</tr>
</tbody>
</table>

*Registration deadline is Nov. 5, 2014
Advance Assignments post to MOODLE by Dec. 5, 2014*

**2015 Summer Sessions: July 6 – 31, 2015**

**Summer Session 1:** **July 6-17, 2015**
*Please select only one course per week*

<table>
<thead>
<tr>
<th>July 6-10, 2015</th>
<th>July 13-17, 2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>121 Bible I: Introduction</td>
<td>123 – Formation &amp; Discipleship</td>
</tr>
<tr>
<td>221 Bible II: Torah &amp; Israel’s History</td>
<td>223 Worship &amp; Sacraments</td>
</tr>
<tr>
<td>321 Bible III: Gospels</td>
<td>323 Congregational Care</td>
</tr>
<tr>
<td>421 Bible IV: Prophets, Psalms &amp; Wisdom Literature</td>
<td>423 Mission</td>
</tr>
<tr>
<td>521 Bible V: Acts, Epistles &amp; Revelation</td>
<td>523 – Evangelism</td>
</tr>
</tbody>
</table>

**Summer Session 2:** **July 20-31, 2015**
*Please select only one course per week*

<table>
<thead>
<tr>
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</thead>
<tbody>
<tr>
<td>122 Theological Heritage I: Introduction</td>
<td>124 – Transformative Leadership</td>
</tr>
<tr>
<td>222 Theological Heritage II: Early Church</td>
<td>224 Administration &amp; Polity</td>
</tr>
<tr>
<td>322 Theological Heritage III: Medieval-Reform.</td>
<td>324 Preaching</td>
</tr>
<tr>
<td>422 Theological Heritage IV: Wesleyan Movement</td>
<td>424 Ethics</td>
</tr>
<tr>
<td>522 Theology in the Contemporary Church</td>
<td>524 Theological Reflection: Practice of Ministry</td>
</tr>
</tbody>
</table>

*Registration deadline is Apr. 15, 2015
Advance Assignments due by May 1, 2015*

*Registration deadline is Apr. 30, 2015
Advance Assignments due by May 15, 2015*
**Signatures**

I understand that the Saint Paul Course of Study is a year-round learning experience and that specific books and assignments are required. I understand that my registration is jeopardized if I do not submit my advance assignments on time. **I understand that a student is expected to attend every class session, and missing more than 20% may result in loss of credit.** I authorize the record of my work at Saint Paul Course of Study School to be reported to my District Superintendent, my conference Board of Ordained Ministry, and the Division of Ordained Ministry in Nashville.

________________________________________________________________________
Student’s signature             Date

*To be accepted this form must include the signatures of your District Superintendent and Local Pastor Registrar.*

District Superintendent _________________________________
Address ______________________________________________
City State Zip _________________________________________
Phone _______________________________________________
Email ________________________________________________

Local Pastor Registrar _________________________________
Address ______________________________________________
City State Zip _________________________________________
Phone _______________________________________________
Email ________________________________________________

District Superintendent’s signature            Date
Local Pastor Registrar’s signature            Date

*Keep a copy of this form for your records!*