Saint Paul School of Theology – COS
13720 Roe Ave, Bldg C, #C139
Leawood, KS 66224
Ph (913) 253-5051 · Jennifer.smith@spst.edu

2027 WINTER REGISTRATION FORM

NEW to Saint Paul COS? Use the Online Admissions Form
Returning Student: register yourself online in Populi

Registration $75 (per class) Deadline: at time of registration
Tuition $300 (per class) Pay (& Withdrawal) Deadline: 01/19/27
Total Cost for each class is $375.00
PAY ONLINE in POPULI or MAIL CHECK (see page 2)

Instructions:

- Please print or type to complete this form.
- Complete ALL sections, including your signature on last page.
- If using this form, obtain the required signatures, DS and LPR.
- If registering online, use automated email for approvals, each term.
- Enclose or pay online the non-refundable registration fee(s).
- Email and/or mail to the Saint Paul Course of Study Office.
- OR – If you are an Established Saint Paul COS Student, you may login to POPULI and register yourself, then pay online.
- Monitor email for detailed enrollment confirmation &/or NEW LOGIN CREDENTIALS.
- FULL PAYMENT IS DUE PRIOR TO THE BEGINNING OF TERM

Personal Information:

First name _____

Preferred name _____

Last name _____

Cell phone _____

Current Email _____

Mailing address _____

City _____ State _____ Zip _____

Date of birth _____

Sex (optional): ☐ Female ☐ Male ☐ Other(non-binary)

RACE / Ethnicity (optional): _____

Preferred Pronoun (optional): ☐ He/Him/His ☐ She/Her/Hers ☐ They/Them/Theirs

GBHEM 6/7-digit PID #: _____

Email cos@gbhem.org if you need your **PID #**

TRANSCRIPT is REQUIRED for proof of 121/122 for 1st time Saint Paul registrant.

Professional Information:

Annual Conference _____

District _____

Date Completed Licensing School _____

Check one: ☐ Full-time Local Pastor ☐ Part-time Local Pastor

☐ Not Currently Appointed ☐ Other _____

Number of church(es) you presently serve. _____

Education completed: ☐ High School ☐ Associate ☐ Bachelors

☐ Masters ☐ Doctorate ☐ Other _____

Course of Study work completed: (prerequisite 121 & 122 as of 2020)

☐ 121=111	☐ 221=211	☐ 321=311	☐ 421=411	☐ 521=511
☐ 122=112	☐ 222=212	☐ 322=312	☐ 422=412	☐ 522=512
☐ 123=213	☐ 223=413	☐ 323=314	☐ 423=513	☐ 523=313
☐ 124=113	☐ 224=114	☐ 324=214	☐ 424=414	☐ 524=514

Please list other Course of Study Schools you have attended:

_____

Notify in case of emergency. _____

Relationship to emergency contact _____

Emergency Phone _____

Most Annual Conferences offer some form of financial assistance, such as scholarships or reimbursements. For specifics to your Conference, please contact your DS or Annual Conference Registrar.

SYLLABUS, WITH BOOKLIST AND ASSIGNMENTS, WILL BE POSTED TO THE BRIGHTSPACE CLASS SITE

Student Name _____

Enrollment: You may choose **ONLY 1 (ONE) CLASS per session (color coded) (up to 2 classes) FOR THIS WINTER 2027 TERM.**

SESSION	Course	Course Name
TUESDAYS SESSION 1 – PICK UP TO ONE CLASS		
TUESDAYS T1	☐ 122	Theological Heritage 1: Introduction
T1	☐ 222	Theological Heritage II: Early Church (starts Wednesday 1/20, then resumes to Tuesdays)
T1	☐ 422	Theological Heritage IV: Wesleyan Movement
T1	☐ 522	Theology in the Contemporary Church
T1	☐ 124	Transformative Leadership
T1	☐ 224	Administration and Polity
T1	☐ 424	Ethics

SESSION	Course	Course Name
THURSDAYS SESSION 1 – PICK UP TO ONE CLASS		
THURSDAYS TH1	☐ 221	Bible II: Torah and Israel's History
TH1	☐ 521	Bible V – Acts, Epistles and Revelation
TH1	☐ 323	Congregational Care
TH1	☐ 423	Mission
TH1	☐ 523	Evangelism

IMPORTANT: DOUBLE CHECK THE ACTUAL SCHEDULE FOR THE CORRECT DATES OF EACH TYPE OF MODULE FOR EACH CLASS AND/OR CHECK THE SYLLABUS THAT IS POSTED TO THE BRIGHTSPACE CLASS PAGE FOR THE CORRECT DATES. THE SYLLABUS IN BRIGHTSPACE WILL HAVE THE CORRECT BOOKLIST AND ASSIGNMENTS, SO YOU MUST LOOK AT THIS AS SOON AS POSSIBLE. NOTE: FINAL WITHDRAWAL DATE IS THE DAY BEFORE YOUR 6HR ZOOM CLASS. NO TUITION REFUNDS AFTER THE FIRST DATE OF THE SEMESTER, BUT THE FINAL WITHDRAWAL DATE GIVES YOU A W AND NOT AN F ON YOUR TRANSCRIPT.

PAYMENT: Send payment separately and **note the term/class, i.e., COS WIN27 122**.

PAY ONLINE
Go through your student account in Populi and pay via the financial tab (pays through Stripe).

MAIL A CHECK
Make checks payable to Saint Paul School of Theology
Mail to: SAINT PAUL SCHOOL AT COMMERCE BANK,
GROUP 1, P.O. BOX 843740,
KANSAS CITY, MO 64184-3740

Photo / Social Media release: Do you approve of your picture and/or name, either in a group setting, classroom setting, worship setting, or Zoom setting, being included in updates to the Saint Paul social media sites and/or shown on our website? ☐ **YES** ☐ **NO**

STUDENT AGREEMENT & SIGNATURE

By signing below or completing online registration, I confirm the following: I understand that the Saint Paul Course of Study is a year-round learning experience and that specific books and assignments are required, as shown on the class syllabus. I understand that my registration and participation in the class are jeopardized if I do not submit my assignment(s) on time, participate in the Zoom class sessions, make the required payments, or obtain the required signatures. I understand that I am expected to attend every class session, including online/Zoom sessions, and that missing more than 20% may result in the loss of credit and/or a failing grade. I authorize the record of my work and final grade at Saint Paul Course of Study School to be reported to my District Superintendent, my Conference Board of Ordained Ministry, and the GBHEM Division of Ordained Ministry in Nashville. I understand that I need to contact the COS Coordinator prior to the Withdrawal Deadline if I wish to drop a course and not be billed tuition, but I will still forfeit the non-refundable, non-transferable registration fee. To withdraw to avoid a failing grade, this must be done NO LATER THAN THE DAY BEFORE YOUR SIX-HOUR CLASS DAY, although I forfeit the entire tuition and fee.

_____ _____
Student's signature **Date**

Please include signatures from your District Superintendent (DS) & Conference Local Pastor Registrar (LPR/BOM/dCOM). FOR EACH TERM!

District Superintendent _____ **Local Pastor Registrar/BOM** _____

Phone _____ Phone _____

Email _____ **Email** _____

_____ _____
District Superintendent's signature **Date** **Local Pastor Registrar's signature** **Date**

Please complete this form and keep a copy for your records. 12-Nov-26