

Summer /Fall Semester 2020

**Course Registration**

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| **Student Information** | | | | | | | | |  | | |
| Name: |  | | |  | | | Student ID | |  | | |
|  | First/Given Name Last/Family Name | | |  | | |  | |  | | |
|  |  | | |  | | |  | |  | | |
| Enrolled Degree Program | | Undergraduate (BABTS ) Graduate (MDIV, MABES, MABC, MAICS&C, MA3ASE) PHD( ICS&L, ICS&ICM) | | | | | Date of Birth | | / / | | |
| Address |  | | | | | | | | | | |
|  | city | | | | | State | Zip-code | | | Country | |
| Phone |  | | Email | |  | | | Intended Graduation | | |  |

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| **BA Level** | | | | | | | | |
| **Time** | | **Course No.** | **Course Title** | **Instructor** | **G/C/E** | **Delivery**  **Off /On line** | **CR** | **Mark**  ***v*** |
| **T**  **U**  **E** | 9:00-11:30 AM |  |  |  |  |  |  |  |
| 11:30-12:00 PM | Chapel | | | |  | Pass/  fail |  |
| 1:00-3:30 PM |  |  |  |  |  |  |  |
|  | 3:30-6:00 |  |  |  |  |  |  |  |
|  | 6:00-8:30 |  |  |  |  |  |  |  |
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| **Master Level** | | | | | | | | |
| **Time** | | **Course No.** | **Course Title** | **Instructor** | **G/C/E** | **Delivery**  **Off /On line** | **CR** | **Mark**  ***v*** |
| **T**  **U**  **E** | 9:00-11:30 AM |  |  |  |  |  |  |  |
| 11:30-12:00 PM |  |  |  |  |  |  |  |
| 1:00-3:30 PM |  |  |  |  |  |  |  |
|  | 3:30-6:00PM |  |  |  |  |  |  |  |
|  | | | | | | | |  |
| **PHD Level** | | | | | | | | |
| **Time** | | **Course No.** | **Course Title** | **Instructor** | **G/C/E** | **Delivery**  **Off /On line** | **CR** | **Mark**  ***v*** |
| **WED** | 9:00-11:30 AM |  |  |  |  |  |  |  |
| 11:30-12:00 PM |  |  |  |  |  |  |  |
| 1:00-3:30 PM |  |  |  |  |  |  |  |
|  | | | | | | | |  |
| * Tuition may be refunded as scheduled below (Usually fees are not refundable) * Dated and Signed Tuition Refund Request Form must be submitted to Office of the Registrarby the scheduled time shown to be entitled to any refunds.   + During the first week of a semster 100% of tution & Fee   + During the second week of a semester 80% of tuition   + During the third week of a semester 70% of tuition   + During the fourth week of a semester 60% of tuition   + During the fifth week of semester 50% of tuition   + After the fifth week No Refund | | | | | | | | |

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| |  | | --- | | * Tuition Due = Tuition Base x Credit Hours = \_\_\_\_\_\_\_ per credit x \_\_\_\_\_\_ Credits = Tuition Due \_\_\_\_\_\_\_\_\_\_   ❏ Certificate : $100 ❏ Graduate : $300  ❏ Undergraduate : $ 200 ❏ Ph.D : $400  ●Free: Registration Fee( $100); Technology Fee( $50); Student’s Association ($50)  ●Payment Option  ❏Payment in Full: Requires payment in full at the time of registration  ❏Tuition Installment Plan: Please submit Installment Payment Plan (with Installment Payment Fee&Charge) | | |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | | Previous Balance | Tuition Due | Other Fees & Charges | Total Amount Due | Payment Method\* (CK/CC#) | Total Payment Made | Current Balance | |  |  |  |  |  |  |  |   \*Please make check(s) payable to Globe Covenant Seminary, If you pay by credit card or direct deposit via bank account or PayPal , there will be some Convenience Charge. GCS highly respects and upholds the right to privacy of its students and is committed to safeguarding the personal information of students. | | | | | | |
| I certify that all information I have wrtten on this form is correct. I have read the policy for the course registration in this form and the seminary catalog.I acknowledge that I follow the refund policies and privacy policies of Globe Covenant Seminary. | | | | | |
| Signature of Student: |  | | | Date: |  |
| Signature of Program Director: |  | | | Date: |  |
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| **REGISTRAR’S OFFICE USE ONLY PROCESSED BY (INITIALS)** | | **REGISTRAR’S OFFICE USE ONLY DATE PROCESSED** | **REGISTRAR’S OFFICE USE ONLY PAYMENT PROCESSED BY (INITIALS)** | | |