100 E. 27th Street, Austin, Texas 78705 Phone: 512-404-4827 / 800-241-1085

 $\underline{admissions@austinseminary.edu} \ / \ FAX: 512-472-7089$

SPECIAL STUDENT APPLICATION and REGISTRATION

Please Print or Type This Form.

IDENTIFICATION (This section to be completed by all Special Student applicants each term)

Full Name	Male Female
Preferred Name	Social Security #
Address	City/State/ZIP
Phone: Work ()	Home()
Cell ())
	e-mail
I have previously enrolled as a Special Student: \(\sigma\)Yes \(\sigma\)No If yes If you have taken courses within the previous year, \(\frac{AND}{a}\) if the info	•
Marital Status: Single Married: Spouse's Name	
HURCH RELATIONSHIP I am a member of a church.	I am not a member of a church.
Church name and address	
Church name and address Denomination (official name)	
Denomination (official name)	
Denomination (official name)	I am currently employed: Yes No
Denomination (official name) MPLOYMENT (We will not_contact employer for reference.)	I am currently employed: Yes No Position
Denomination (official name) MPLOYMENT (We will not contact employer for reference.) Employer	I am currently employed: Yes No Position Supervisor

ACADEMIC BACKGROUND (Transcripts may be requested by the Admissions Office.)

INSTITUTION	LOCATION			DEGREE EARNED	YEAR REC'D
HIGH SCHOOL		FROM	ТО		
COLLEGE/UNIVERSITY		FROM	ТО		
GRADUATE/PROFESSIONAL SCHOOL, SEMINARY		FROM	ТО		

REGISTRATION INFORMATION

DESIRED COURSE OF STUDY

I seek admission as a	-					
Fall; Jan	ıary;	Spring;	Summer;	term of the 20	20	academic year.
I would like to regi	ster for the	ollowing cou	ırse(s):			
Course Number	Title and P	rofessor				Credits
1	/					
2	./ <u></u>					
3	/					
THER INFORMATION						
I anticipate reapplyir		Student duri	ng the			
1 11,	uary;		Summer;	term of the 20	- 20	academic year.
In the future, I may a			,	Studies) degree program		•
in the future, I may a	pply to the.		<u> </u>	program at Austin Sei		Schimary
		Maste	or Divinity degree	program acriasim ser	······································	
GNATURE				DATI	·	
An annual reg	istration fee o	of \$60.00, a st	udent activity fee o	f \$30.00 per semester,	and all tuiti	on charges must be paid
	Special Stude	-	or to the beginning of		agraphs) of	why they wish to enroll in
First-time Spe for Admission	cial Student a s.	pplicants mu	st complete a brief	(20 minute) admission	s conferenc	e with the Vice President
through Castl our institution responsibility	ebranch.com. n's package co of the studen	To grant Aust de (AU33) wh t. Note that c	in Seminary access en you submit you harges and past offe	nplete a criminal histo to your background ch information online. T enses do not automatio mission for more info	neck, enter The cost for total	
OR OFFICE USE ON	LY This stu	dent is elig	ible to enroll in	courses that are a	vailable a	nd is admitted as a Spe
Fall; Janu	ary;	Spring;	Summer;	term of the 20	20	academic year.
ignature, Vice Presider	t for Enrolln	nent Manage	ement	Date	e	
Registrar/Da <u>te</u>			1			JUNE 20