

Washington Theological Consortium Registration Form

	STUDENT NAME	•			
	Home School	•			
	Are you graduating this term	1?			
			Course Informati	<u>on</u>	
	COURSE TITLE	•			
	HOST SCHOOL	•			
	Course Number & Section	•			
	Course Instructor	•			
	Semester &Year of Course	•			
	Admission or Withdrawal?	•			
	Audit or Credit?	•			
	Course Credit Hours	•			
	Application Date	•			
			Student Informati	<u>on</u>	
	CUA Student # (on ID card)	•			
	Birth date	•			
	Street & Apt. Address	•			
	City, State, Zip	•			
	Home Phone	•			
	Cell Phone	•			
	Preferred Email Address	•			
	Academic Area and Degree	•			
	Transfer in ou unu Degree				
Academic Advisor				Date	
Area Director (Required for M.A., S.T.L., Ph.D. & S.T.D. students)				Date	
Area Director (Required for M.A., S.T.L., Th.D. & S.T.D. Students)			b.1.D. students)	Date	
Associate De	Associate Dean			Date	

Form instructions:

- 1) Have your Academic Advisor, Area Director (where required), and an Associate Dean sign this form, then make two copies. Give the original to a staff member in Caldwell Hall 106 for processing. Registration forms will NOT be processed without all required signatures.
- 2) Please retain a copy for your files.

Note: If you want to register for a second Washington Theological Consortium course this semester, you must complete the 'Permission to take a Second WTC Course' request form. If you wish to take a class at JPII, you must fill out a JPII/CUA cross registration form.



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