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|  | St. Joseph of Arimathea Anglican Theological College  |

# Registration Application- Fall Semester 2022

# Section #1- Applicant Information

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| --- | --- | --- | --- | --- | --- |
| **Full Name:** |  |  |  | **Date**: |  |
|  | **Last** | **First** | **M.I.** |  |  |

|  |  |  |
| --- | --- | --- |
| **Address:** |  |  |
|  | **Street Number/Street Name** | **Apartment/Unit #** |

|  |  |  |  |
| --- | --- | --- | --- |
|  |  |  |  |
|  | **City** | **State** | **Zip Code** |

|  |  |  |  |
| --- | --- | --- | --- |
| **Phone:** |  | **Email** |  |

## Section #2- Course Registration

|  |  |
| --- | --- |
| **Name of Course #1:** |  |

|  |  |
| --- | --- |
| **Name of Course #2:** |  |

|  |  |
| --- | --- |
| **Name of Course #3:** |  |
| **Name of Course #4:** |  |

***(Please mark with an X by the prompt under ‘Credit’ or ‘Audit’ for your choice of participation for each course registration.)***

|  |  |  |  |
| --- | --- | --- | --- |
| **Session:** | ***Credit*** | ***Audit*** |  |

 **Fall Semester 2022 Tuition: Zoom Platform: Credit- $250.00 per course. Audit- $75.00 per course.**

|  |  |
| --- | --- |
| **Total Tuition for Fall Semester 2022:*****(Make check payable to St. Joseph of Arimathea Anglican Theological College)*** | $ |

## Section #3- APCK Church Affiliation

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| --- | --- | --- | --- |
| **Parish/Mission Name:** |  | **City/State:** |  |

|  |  |
| --- | --- |
| **How long have you been affiliated with an APCK Parish or Mission?** | :  |

***(Please mark the appropriate answers with an X by the prompt.)***

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Are you a Postulant for the Diaconate?:** | ***YES*** | ***NO*** | **Sponsoring Priest:** |  |
| **Are you a Postulant for the Priesthood?:** | ***YES*** | ***NO*** | **Sponsoring Priest:** |  |

## Section #4- Education

**(Please list your education information to include secondary and college/university.)**.

|  |  |  |  |
| --- | --- | --- | --- |
| **Secondary; School Name:** |  |  |  |
| **City/State:** |  |  |  |
| **Degree Received:** |  |  |  |
| **Years Attended:** |  |  |  |
|  |  |  |  |
| **College/University:** |  | : |  |
| **City/State:** |  |  |  |
| **Degree Received:** |  |  |  |
| **Years attended:** |  |  |  |
|  |  |  |  |
| **College/University:** |  |  |  |
| **City/State:** |  |  |  |
| **Degree Received:** |  |  |  |
| **Years attended:** |  |  |  |
|  |  |  |  |
| **College/University:** |  |  |  |
| **City/State:** |  |  |  |
| **Degree Received:** |  |  |  |
| **Years attended:** |  |  |  |
|  |  |  |  |
| **College/University:** |  |  |  |
| **City/State:** |  |  |  |
| **Degree Received:** |  |  |  |
| **Years attended:** |  |  |  |
|  |  |  |  |

## Acknowledgement

I acknowledge that I have discussed with my sponsoring Priest the duties and responsibilities of attending St. Joseph of Arimathea Theological College. I further acknowledge that I have read the information about the Seminary using the link on the APCK website, [www.anglicanpck.org](http://www.anglicanpck.org) and hereby understand the requirements of the course work that I am pursuing.

I further acknowledge to complete the registration process for the **Fall Semester 2022** in compliance with the information in the Call Letter for Registration for the Fall Semester 2022.

**I FURTHER ACKNOWLEDGE THAT THE ‘REGISTRATION APPLICATION’ AND TUITION PAYMENT ARE TO BE POST-MARKED NO LATER THAN AUGUST 20th, AD 2022. PLEASE PLAN ACCORDINGLY.**

**\*\*\*LATE REGISTRATIONS FOR THE FALL SEMESTER 2022 WILL BE SUBJECT TO APPROVAL.\*\*\***

I certify that my answers are true and complete to the best of my knowledge.

An electronic signature serves as an original in accordance with the ESIGN Act of 2000.

|  |  |  |  |
| --- | --- | --- | --- |
| Signature: |  | Date: |  |