



Midwestern Baptist Theological Seminary Enrollment Form for Degree Seeking Students

www.mbts.edu

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Phone: (816) 414-3713 Fax: (816) 414-3705 Email: registrar@mbts.edu

NOTE: This Class Enrollment Form is only for Degree-Seeking Students. If you are a non-degree seeking student, do ***not*** use this form to register for classes. Use the *Enrollment Form for Non-Degree Seeking Students* form.

Semester/Term & Year: _____
(FA=Fall, JAN=January, SP=Spring, SU=Summer)

Name: _____

Student ID: _____

Current Address: _____

Degree Program/Major: _____

Home Phone: _____

E-mail address: _____

Cell Phone: _____

I will be living on campus during this semester/term: Students living on campus must fulfill housing requirements. Please contact the housing office to determine what requirements are needed.

I will NOT be living on campus during this semester/term

U.S. Government Ethnicity and Race Reclassification – response is required so records can be updated

Screening Questions (answer only one, A or B):

- A. I am an international, nonresident alien student (i.e., a non-U.S. citizen or non-permanent resident of the U.S.)
- B. Ethnicity/Race (for reporting use only): Please answer **both questions** below – or check here if you choose not to respond
1. My ethnicity is Hispanic or Latino: Yes No
2. My race is one or more of the following, please select one or more: American Indian or Alaska Native; Asian; Black or African American; Native Hawaiian or Other Pacific Islander; White

COMPLETE A SEPARATE ENROLLMENT FORM FOR EACH SEMESTER OR TERM YOU ENROLL

1. **Course Type:** OC = On Campus; EXT = Extension Campus; CCC = Computer/Campus/Computer; OL = Online, Internet; MAC = MACCEL
 2. **Course Credit:** CR= Credit; AU = Audit/Continuing Education (enrollment may be restricted to credit students when class sizes are limited)

Course					2. Course Credit / Audit (CR) / (AU)	Course meeting Day(s) & Time
Dept. & Number	Section	1. Type	Title	Hours		

Total hours for Credit: _____ **Total hours for Audit:** _____

- I am an active member/attende of a local church (list name, city, and state): _____
- This church is (select one): **Southern Baptist;** **Other (non-SBC) Baptist;** **All Others (non-Baptist)**

Student's Signature

Date Signed

The student is responsible to see that all courses are taken according to the program requirements listed in the catalog for the degree program/major selected by the student and that all requirements for the degree are met.

Registrar's Office: Time & Date Received _____ Received by: _____ (Form revised 3/7/2014)