



# CAROLINA UNIVERSITY OF THEOLOGY

14654 Joplin Road  
Manassas, VA 20112  
(703) 791-3499 / 791-8263 FAX

ACADEMIC YEAR: 20\_\_/20\_\_  
TERM: Fall I \_\_\_\_\_ Fall II \_\_\_\_\_ Winter I \_\_\_\_\_ Winter II \_\_\_\_\_

## ITEMS NEEDED TO REGISTER

- Admissions Application (New enrollees only)
- Course Registration Form
- OFFICIAL transcripts from all colleges attended (New enrollees only)

## Class Registration Form

Name:	Social Security Number:	Date:		
Enrollment Status	Freshmen	Sophomore	Junior	Senior
Address	City	State	Zip	
Phone Number (        )	Email			
Degree Program: (Choose 1) Bachelor Biblical Studies Masters		(please write in degree title)		
I am only enrolled in one course. Enclosed is my tuition payment of \$ _____.				
____ <b>CC, DC, Check</b> (circle one: Credit Card/Debit Card) A copy of the authorization to bill must be attached. The student agrees to pay the authorized amount by credit card.				
I am on the monthly payment plan. Enclosed is my tuition payment of \$ _____.				
____ <b>TAP – Tuition Agreement Plan</b> PLEASE COMPLETE THE SEPARATE APPLICATION. (If you have not already completed.)				
Enclosed is my entire tuition payment of \$ _____.				
____ <b>PD – Payment in Full.</b> Pay in full two weeks before the term begins or you will be automatically dropped from your class.				
<i>I understand Payment will be due, no later than the 15<sup>th</sup> Day of each month.</i>				
I understand and agree that I am fully and personally liable for all tuition and other fees and charges incurred by me to Carolina University of Theology. If, at any time, any amount is not paid as and when due to Carolina University of Theology, for any reason whatsoever, including without limitation, delay or error of a government entity, corporation or other third party, I agree to pay the entire amount due within ten (10) days of receipt of a request for payment. I further agree that Carolina University of Theology shall have the right to withhold transcripts or diplomas related to my enrollment, cancel my enrollment for a current term and/or refuse my enrollment for future terms. If, at any time, my account is overdue or has been overdue in the past, Carolina University of Theology reserves the right to refuse to allow me to participate in its Tuition Options Payment Plan. In the event that my account is referred to an agency or attorney for collection, I promise to pay, in addition to all amounts otherwise due to Carolina University of Theology, the costs and expenses of such collection and/or representation, including, without limitation, reasonable attorney's fees and expenses (whether or not litigation is commenced), to the extent permitted by applicable law. I hereby acknowledge and agree that I will be bound by any instructions or authorizations I may give over the telephone to Carolina University of Theology.				
Student's Signature		Date		

Equipping Men and Women for the Call of God

**PLEASE ENROLL ME IN THE FOLLOWING COURSE(S):**

**Student Name**

**Student ID#**

<b>CRS. CODE/TITLE</b>	
BA-101 THE PENTATEUCH I, II	<input type="checkbox"/>
BA 102 OLD TESTAMENT HISTORY I, II	<input type="checkbox"/>
BA 103 EXPERIENTIAL BOOKSI, II	<input type="checkbox"/>
CE 502 HISTORY OF THE SCRIPTURES I, II	<input type="checkbox"/>
BA 201 MAJOR PROPHEYS,II	<input type="checkbox"/>
BA 202 MINOR PROPHEYS, II	<input type="checkbox"/>
BA 203 INTER-TESTAMENT PERIODI, II	<input type="checkbox"/>
MM 505 EFFECTIVE BIBLE TEACHING I, II	<input type="checkbox"/>
BA 301 NEW TESTAMENT HISTORY I, II	<input type="checkbox"/>
BA 302 CHRISTIAN CHURCH EPISTLES I, II	<input type="checkbox"/>
BA 303 PASTORAL EPISTLES I, II	<input type="checkbox"/>
BA 304 HEBREW CHRISTIAN EPISTLES I, II	<input type="checkbox"/>
BA 204 SUNDAY SCHOOL PRACTICUM I, II	<input type="checkbox"/>
BA 403 DOCTRINES OF CHRISTIAN RELIGION I, II	<input type="checkbox"/>
MM 502 CHURCH ADMINISTRATION I, II	<input type="checkbox"/>
TH 504 KINGDOM OF THE CULTS I, II	<input type="checkbox"/>
TH 506 HERMENEUTICS I, II	<input type="checkbox"/>
MM-MMI	<input type="checkbox"/> Graduation requirement for NOVA CAMPUS
<b>FOR OFFICE USE ONLY</b>	
<b>Payment Amt:</b>	<b>Check #:                      Cash:                      Date:</b>
<b>University Registrar                      University Representative</b>	

**THE HIGHLIGHTED COURSES WILL BE OFFERED IN JANUARY.**  
**OL-online class**  
**OC-on campus**