



Master of Theological Studies

Statistical Reporting Information		Race			TERM	Fall	20
Date of Birth		Religion				Spring	20
Male/Female (Circle One)		Marital Status				Summer	20
LAST NAME		FIRST NAME		MIDDLE		SOCIAL SECURITY NUMBER	
PERMANENT ADDRESS		CITY		STATE		ZIP	
BILLING ADDRESS (IF DIFFERENT FROM PERMANENT ADDRESS)						WILL GET BOOKS	
		COST		COURSE(S) REGISTERING FOR: (7 CREDITS MAXIMUM)			FROM COLLEGE
TUITION		DISCIPLINE	COURSE #	CREDITS	INSTRUCTOR		BOOKSTORE?
		MTS					<input type="checkbox"/> YES <input type="checkbox"/> NO
OR		MTS					<input type="checkbox"/> YES <input type="checkbox"/> NO
AUDIT		MTS					<input type="checkbox"/> YES <input type="checkbox"/> NO
		MTS					<input type="checkbox"/> YES <input type="checkbox"/> NO
Technology Fee \$18.75 per course		MTS					<input type="checkbox"/> YES <input type="checkbox"/> NO
ROOM		MTS					<input type="checkbox"/> YES <input type="checkbox"/> NO
\$70/person/week		MTS					<input type="checkbox"/> YES <input type="checkbox"/> NO
Must reserve by May 1st		MTS					<input type="checkbox"/> YES <input type="checkbox"/> NO
TOTAL COST		MTS					<input type="checkbox"/> YES <input type="checkbox"/> NO
LESS AMOUNT ENCLOSED		MTS					<input type="checkbox"/> YES <input type="checkbox"/> NO
BALANCE DUE		MTS					<input type="checkbox"/> YES <input type="checkbox"/> NO

I hereby acknowledge financial responsibility for the tuition and fees resulting from this registration

Return completed form to:
 MTS c/o DeEtte Radant
 St. Norbert College
 De Pere, WI 54115

or

FAX #: 403-4086

 Students Signature

 Date