

Application/Registration form (B.A.P.):

Status: (please check one)

- Special Student: Registering for 3 credits (\$1,460)
- Auditor: Not registering for credit (\$575)
- Special Auditor (\$385)
- Jan. 2007 Session / June 2007 Session

Full Name: _____
(including preferred title)

Street Address: _____

City, State & Zip Code: _____

Home Phone: _____ **Work Phone:** _____

Date of Birth: _____

E-mail Address: _____

Social Security Number: _____

(1997 Taxpayer Relief Act requirement per the Treasury Department and the Internal Revenue Service)

Educational Background: Please list below each degree received, name of institution and date of graduation. Please note: Students seeking credit must have an undergraduate degree and must request that their undergraduate transcript(s) be sent to the registrar at Hartford Seminary.

Return this form with check payable to Hartford Seminary to:

Registrar, Hartford Seminary, 77 Sherman Street, Hartford, CT 06105

The following information is requested for statistical reporting purposes and is optional:

Gender: Male Female

Ethnic Background:

- Latino Asian-American
- African-American Other
- Euro-American

Religious Affiliation:

(Please be specific: e.g., UCC, African Methodist Episcopal, Sunni Muslim, Reform Jewish,, etc.)