

## January Intersession and Winter/Spring Session 2012

### Special Student and Auditor Application/Registration Form

**Full Name (including preferred title):** \_\_\_\_\_

**Street Address:** \_\_\_\_\_

**City, State, Zip Code:** \_\_\_\_\_

**Home Phone:** \_\_\_\_\_ **Work Phone:** \_\_\_\_\_

**Social Security Number:** \_\_\_\_\_

(1997 Tax Payer Relief Act Requirement per the Treasury Department and the Internal Revenue Service)

**Date of Birth:** \_\_\_\_\_ **Email Address:** \_\_\_\_\_

**Educational background:** Please list below each degree received, name of institution and date of graduation. **Please note:** Students seeking credit must have a B.A. and must request that their undergraduate transcript(s) be sent to Admissions at Hartford Seminary.

\_\_\_\_\_

\_\_\_\_\_

Course #	Course Name	Credit/Audit

**Academic Status and Course Tuition:** (please check one; forms will not be processed without full payment)  
 **Special Student:** \$1,800     **Auditor:** \$575     **Special Auditor:** \$385 (Indicate category below)

60+    55+ receiving disability    H.S. Degree Graduate    Donor    Adjunct Faculty    IPP student (attach copy of card)

You may pay your tuition by check (attached and payable to Hartford Seminary) without a service charge.

All credit card payments, and payment plans for special students, must be made online at: [www.hartsem.edu](http://www.hartsem.edu).

Open the **Current Students** tab, select **E-Payment/Payment Plan**. Fees: A 2.5% convenience fee will be charged for payment with credit card. A \$10 per semester fee will be charged when making a credit card payment in full. A \$41 per semester fee will be charged when setting up a payment plan. Questions? Contact Nancy Wood at (860) 509-9524 or by email: [nancy@hartsem.edu](mailto:nancy@hartsem.edu).

**Please check if you would like information about graduate programs at Hartford Seminary** \_\_\_\_\_

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

**Gender:**     Male     Female

**Ethnic Background:**     African-American     Asian-American     Euro-American     Latino-American  
 Other

**Religious Affiliation:** \_\_\_\_\_  
(Please be specific i.e., United Church of Christ, African Methodist Episcopal, Sunni Muslim, Reform Jewish, etc.)

**Return completed form with check to: Registrar, Hartford Seminary, 77 Sherman Street, Hartford, Connecticut 06105-2260**