



New England Bible College
 PO Box 2886
 South Portland ME 04116
 207-799-5979 1-866-529-6322
info@nebc.edu

Continuing Enrollment Registration

Name: Last: _____ First: _____ Middle: _____

Address: Street: _____ City: _____ State: _____ Zip: _____

Telephone: _____ NEBC Email: _____

Semester of Continuing Enrollment (ex: spring 2008) _____

Reason for Continuing Enrollment:

Do you plan to register for classes in the following semester? Yes No

Do you plan to graduate this semester? Yes No If yes, attach your "Intent to Graduate" form.

Student Signature: _____ Date: _____

Advisor's Signature: _____ Date: _____

Financial Office use only

Continuing Enrollment Fee: \$40			
Student Activity Fee: \$25/\$15			
Graduation Fee: \$50			
Other			
TOTAL:			