

# REGISTRATION FORM

New England Bible College  
 P.O. Box 2886, S. Portland, ME 04116-2886

<b>Please print</b>	
Name: <i>(last, first, middle)</i>	Student I.D.: <span style="float: right;">Date:</span>
Permanent Address:  Current Address: <i>(if different)</i>	Semester <i>(ex: Fall 2005)</i>
	Telephone numbers: home: (     )
	work: (     )
	E-mail:

**Enrollment Information** *(please check appropriate boxes)*

BA Bible	<input type="checkbox"/>	BS Christian Ministry	<input type="checkbox"/>	Certificate	<input type="checkbox"/>
BS Missions	<input type="checkbox"/>	Associate of Arts	<input type="checkbox"/>	Special	<input type="checkbox"/>

Hours completed: include transfer credit that has been accepted by NEBC

0-30       31-60       61-90       91-120

Course Identification <i>(please list in course number order)</i>			office use	
Number	Course Name	Credit Hours		

Student Signature:	Date:	total sch:
Faculty Advisor:	Date:	

Financial - office use only		office use	
<b>Tuition</b> <i>See current catalog for payment terms.</i>	\$		
<b>Fees</b> Registration			
Student Activity (Degree & Certificate students)			
Library			
Transfer of Credit			
Re-admission			
Late Registration			
Other:			
<b>Total Tuition and Fees</b>	\$		
Promissory Note Completed and Signed	Date:		
Financial Agent:	Date:		

Updated 4/4/2005

updated April 4, 2005