

# Channel Islands Bible College and Seminary Independent Studies - Registration

**PRINT CLEARLY**

**PRINT CLEARLY**

**NEW STUDENT?** ( ) Yes ( ) No [Student ID Number \_\_\_\_\_]

Date: \_\_\_\_\_ Home Phone: ( ) \_\_\_\_\_ Wk Phone: ( ) \_\_\_\_\_ Cell phone ( ) \_\_\_\_\_

Name: Last \_\_\_\_\_ First \_\_\_\_\_ M.I. \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Gender [ ] M [ ] F

Street Address \_\_\_\_\_ Apt. \_\_\_\_\_ City \_\_\_\_\_ St. \_\_\_\_\_ Zip \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Social Security Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Citizen of: \_\_\_\_\_ Marital Status [ ] Married [ ] Single

High School Attended \_\_\_\_\_ City \_\_\_\_\_ Name of Country \_\_\_\_\_ St. \_\_\_\_\_ Graduation Year \_\_\_\_\_

If not a High School Graduate do you have a GED? [ ] Yes [ ] No.

If yes, obtained from: \_\_\_\_\_ Highest Grade Completed: \_\_\_\_\_ Degrees Held: \_\_\_\_\_

Christian? \_\_\_\_\_ If yes, how many years? \_\_\_\_\_ Church Affiliation \_\_\_\_\_ City \_\_\_\_\_ St. \_\_\_\_\_

Emergency Contact Person: \_\_\_\_\_ Relationship \_\_\_\_\_ Phone: ( ) \_\_\_\_\_

## PROGRAM OF STUDY

**Returning Students** who are registering for credit classes and are interested in pursuing a degree should submit a "Declaration of Program of Study" (CIBCS Form: CI-351-DAS Rev. 1)

*If you have already submitted a "Declaration of Program of Study" disregard the above.*

**New Students** who are registering for Credit and are interested in pursuing a degree need not fill out a "Declaration of Program of Study" immediately, but should submit one by the start of the next Semester.

*If you desire guidance on your Program of Study please make an appointment with an Academic Counselor.*

CIBCS Form CI-351-DAS Rev. 1 is available during the Registration Process and in the Admissions Office.

## Select No More Than Three (3) Classes

**For Selection of Available Independent Studies Classes Refer to the Student Handbook**

Class Title: \_\_\_\_\_ Code: \_\_\_\_\_

Class Title: \_\_\_\_\_ Code: \_\_\_\_\_

Class Title: \_\_\_\_\_ Code: \_\_\_\_\_

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

**Equipping the Saints for the Work of Ministry**