



# St. Joseph of Arimathea Anglican Theological College

## Registration Application- Spring Semester 2022

### Section #1- Applicant Information

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
*Last First M.I.*

Address: \_\_\_\_\_  
*Street Number/Street Name Apartment/Unit #*  
\_\_\_\_\_  
*City State Zip Code*

Phone: \_\_\_\_\_ Email \_\_\_\_\_

### Section #2- Course Registration

Name of Course #1: \_\_\_\_\_

Name of Course #2: \_\_\_\_\_

Name of Course #3: \_\_\_\_\_

Name of Course #4: \_\_\_\_\_

*(Please mark with an X by the prompt under 'Credit' or 'Audit' for your choice of participation for each course registration.)*

Session: Credit Audit  
Spring 2022 Semester Tuition: Credit- \$250.00      Audit- \$75.00

Total Tuition for Spring 2022 Semester:  
*(Make check payable to St. Joseph of Arimathea Anglican Theological College)* \$ \_\_\_\_\_

### Section #3- APCK Church Affiliation

Parish/Mission Name: \_\_\_\_\_ City/State: \_\_\_\_\_

How long have you been affiliated with an APCK Parish or Mission?: \_\_\_\_\_

*(Please mark the appropriate answers with an X by the prompt.)*

Are you a Postulant for the Diaconate?: YES NO      Sponsoring Priest: \_\_\_\_\_

Are you a Postulant for the Priesthood?: YES NO      Sponsoring Priest: \_\_\_\_\_

## Section #4- Education

*(Please list your education information to include secondary and college/university.)*

Secondary; School Name: \_\_\_\_\_

City/State: \_\_\_\_\_

Degree Received: \_\_\_\_\_

Years Attended: \_\_\_\_\_

College/University: \_\_\_\_\_

City/State: \_\_\_\_\_

Degree Received: \_\_\_\_\_

Years attended: \_\_\_\_\_

College/University: \_\_\_\_\_

City/State: \_\_\_\_\_

Degree Received: \_\_\_\_\_

Years attended: \_\_\_\_\_

College/University: \_\_\_\_\_

City/State: \_\_\_\_\_

Degree Received: \_\_\_\_\_

Years attended: \_\_\_\_\_

College/University: \_\_\_\_\_

City/State: \_\_\_\_\_

Degree Received: \_\_\_\_\_

Years attended: \_\_\_\_\_

## Acknowledgement

*I acknowledge that I have discussed with my sponsoring Priest the duties and responsibilities of attending St. Joseph of Arimathea Theological College. I further acknowledge that I have read the information about the Seminary using the link on the APCK website, [www.anglicanpck.org](http://www.anglicanpck.org) and hereby understand the requirements of the course work that I am pursuing.*

*Email the 'Registration Application' when complete to the Vice-Provost/Registrar, [fr.benjones@gmail.com](mailto:fr.benjones@gmail.com).*

*Please mail your tuition payment and 'Registration Application' to; The Rt. Rev. Ben E. Jones, Jr., St. Joseph of Arimathea Theological College, 2820 Exeter Circle, Raleigh, NC 27608.*

*The 'Registration Application' and tuition payment are due and to be received **NO LATER THAN JANUARY 05<sup>th</sup>, AD 2022. PLEASE PLAN ACCORDINGLY.***

*I certify that my answers are true and complete to the best of my knowledge.*

*An electronic signature serves as an original in accordance with the E-SIGN Act of 2000.*

Signature: \_\_\_\_\_ Date: \_\_\_\_\_