



St. Joseph of Arimathea Anglican Theological College

Registration Application- Spring Semester 2023

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 add after 'Name of Course #1, #2, #3, #4' whether the course is for 'Credit' or 'Audit'.)

Session:
Spring Semester 2023 Tuition: Zoom Platform: Credit- \$250.00 per course. Audit- \$75.00 per course.

Total Tuition for Spring Semester 2023:
(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 and hereby understand the requirements of the course work that I am pursuing.

*I further acknowledge to complete the registration process for the **Spring Semester 2023** in compliance with the information in the Call Letter for Registration for the Spring Semester 2023.*

I FURTHER ACKNOWLEDGE AND UNDERSTAND THAT THE 'REGISTRATION APPLICATION' AND TUITION PAYMENT ARE TO BE POST-MARKED NO LATER THAN January 4th, AD 2023. PLEASE PLAN ACCORDINGLY.

******LATE REGISTRATIONS FOR THE FALL SEMESTER 2022 WILL BE SUBJECT TO APPROVAL.******

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: _____