



7301 Germantown Avenue, Philadelphia, PA 19119  
Telephone [215] 248-6302

## ENROLLMENT FORM

- Enrolling for the first time at The Lutheran Theological Seminary at Philadelphia  
 Enrolled previously as  Non-matriculant  Auditor  
 I have been admitted as student at  LTSP  Other: \_\_\_\_\_  
 Program:  MDiv  MAR  Special/Certificate  STM  DMin  PhD  Other: \_\_\_\_\_  
 I intend to apply, or have applied, for admission to a degree program at The Lutheran Theological Seminary at Philadelphia.

### Section 1: Personal Information (to be completed by all)

NAME: \_\_\_\_\_  
   [Last]  [First]  [Middle]  
 Title:  Ms.  Mrs.  Mr.  The Rev.  Other: \_\_\_\_\_  
 Mailing Address: \_\_\_\_\_  
   \_\_\_\_\_  
 Telephone: Preferred [ ] \_\_\_\_\_ Other [ ] \_\_\_\_\_  
   Type: \_\_\_\_\_ Type: \_\_\_\_\_  
 E-mail (@ltsp, if available): \_\_\_\_\_

### Race/Ethnicity

(optional; for reporting summary statistics to government and accrediting agencies only):

- Check if you are:  
 Non-resident alien  
 Hispanic/Latino  
 If neither of the above, check one or more of the following:  
 White  
 Black or African American  
 Asian  
 Native Hawaiian or other Pacific Islander  
 American Indian or Alaska Native

I have read and understand the policies described in this registration set, including those on registration, withdrawal from courses, course extensions, and payments. I accept liability for all charges incurred with the registration shown on the Course Registration Form.

\_\_\_\_\_ [signature]

\_\_\_\_\_ [date]

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### Section 2: Complete the following if you are new to LTSP, if you have not taken a course during the current academic year, or if you need to report any changes.

Date of Birth: \_\_\_\_\_ Soc. Security #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
 City/State/Country of Birth: \_\_\_\_\_ Citizenship: \_\_\_\_\_  
 Your Denomination/Church Body: \_\_\_\_\_  
 Synod/Diocese/Other Judicatory: \_\_\_\_\_  
 Congregation: \_\_\_\_\_  
 Congregation Address: \_\_\_\_\_  
 Current position in congregation, if any: \_\_\_\_\_  
 Institution from which you received Bachelor's degree: \_\_\_\_\_  
 Bachelor's Degree type: \_\_\_\_\_ Month/Year Conferred: \_\_\_\_\_  
 If registering for courses in the Graduate School, what institution conferred your MDiv or equivalent degree?  
 \_\_\_\_\_ Degree: \_\_\_\_\_ Year: \_\_\_\_\_

The Registrar's Office must receive an official transcript showing your undergraduate degree (first-professional-level students) or first theological degree (advanced-level students):

- Transcript is on file at LTSP from prior enrollment  
 Transcript has been requested

**Transcript not required for auditors**

*[You may register on the basis of an unofficial photocopy of your transcript, but if the official transcript is not received by the midpoint of the term, your registration will be cancelled with the academic and financial penalties being those of withdrawal. It will be your responsibility to verify receipt of your transcript by the Seminary.]*

**Submit to Enrollment Services along with Course Registration Form**