



Union Baptist College and Theological Seminary

E. J. Thompson Sr., Multipurpose Center

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P. O. Box 8572 • Metairie, Louisiana 70011-8572

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Night Student _____
Day Student _____
Decal # _____

Social Security No. _____ / _____ / _____

Name _____ Date _____
(Last) (First) (Middle/Maiden)

Address _____ Home Phone No. _____

City _____ State _____ Zip Code _____ Work No. _____

DEGREE PROGRAM _____ SEMESTER _____ 20____

TUITION \$ _____

OTHER FEES (DEFERMENT, ETC.) \$5.00, Late Fees \$25.00 \$ _____

APPLICATION FEE \$ 20.00

APPLICATION FOR RE-ADMISSION \$ 20.00

REGISTRATION FEE \$ 35.00

PARKING FEE \$ 10.00

LIBRARY FEE \$ 5.00

I.D. PHOTIO \$ 10.00

PREVIOUS BALANCE (IF ANY) \$ _____

TOTAL AMOUNT OWED \$ _____

This is a PERSONAL ACCOUNT _____, SCHOLARSHIP ACCOUNT _____

I understand that if a PERSONAL ACCOUNT, I am responsible for my tuition. I promise to have the balance paid not later than TWO WEEKS /20 , AFTER THE BEGINNING OF THIS SCHOOL YEAR. IF FULL TUITION IS NOT RECEIVED, STUDENT WILL NOT BE PERMITTED TO ATTEND CLASS. My signature confirms my agreement.

Signature _____

If a SCHOLARSHIP ACCOUNT. The Church I currently attend,

_____ ASSOCIATION will be responsible for the full payment of my tuition as mentioned in the LETTER OF SPONSORSHIP I AM SURRENDERING to you.