MCOB Student Resgistration Form

First Name _____

Last Name _____

City, State, and Country of Residence _____

_____

Questions (Required for Enrollment):

1. Do you have access to a computer? (Smart phones and tablets do not apply)

   ☐ Yes

   ☐ No

2. Do you have access to the Internet?

   ☐ Yes

   ☐ No

3. Do you have a Gmail account?

   ☐ Yes

   ☐ No

4. What is your Gmail address? (If you do not have a Gmail account, make one and provide it here.) _____

5. Do you have access to Microsoft Word and PowerPoint?

   ☐ Yes

   ☐ No

6. If you answered "No" to having Word or PowerPoint, will you be able to install them *before the semester begins*?

   ☐ Yes

   ☐ No

7. Is English your primary or secondary language?

   ☐ Primary Language

   ☐ Secondary Language

8. If English is your secondary language, what is your primary language? _____

   _____

9. What is your highest level of education?

   ☐ High School

   ☐ Undergraduate Degree

   ☐ Graduate Degree

   ☐ Postgraduate Degree

   ☐ None of the Above

10. What previous schools have you graduated from? _____

    _____

11. In your previous education, what was your degree type (BA, MA, etc.)? What was your field of study (Biblical Studies, Ministry, etc.)?

    _____

12. Have you submitted your previous transcripts to the registration office?

- [ ] Yes
- [ ] No

13. What program are you wanting to apply for?

- [ ] BA, Biblical Studies
- [ ] MA, Christian Doctrine
- [ ] MA, Christian Ministry
- [ ] Master of Divinity
- [ ] Doctor of Theology

14. Are you wanting to enroll part-time (1 class per semester) or full-time (2+ classes per semester)?

- [ ] Part-time
- [ ] Full-time

15. Are you currently a minister, elder, or teacher at a local congregation?

- [ ] Yes
- [ ] No

16. If you are not a current minister, elder, or teacher, are you a member in good standing with a local church?

- [ ] Yes
- [ ] No

17. What church do you serve and/or attend? _____

_____

18. What made you wish to enroll MCOB? _____

_____

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