EDUCATION
FOR
MINISTRY

REGISTRATION FOR NEW, RE-ENTRY, AND TRANSFER STUDENTS

PLEASE print legibly in ink!

Administrative Mentor: _____

Group-ID: _____ (if known) **Your Starting Month**: _____ (confirm w/mentor)

Circle: Ms/ Mrs / Mr / Rev / Dr / Deacon / Other: _____

Full Name _____
Last **First** **Middle** **Preferred**

Social Security # _____ (While not required, SSN is very helpful in preventing duplicate entries in the University's database of more than 182,000 people. It is printed only on transcripts.)

Address _____

City/State/Zip _____

Phones: Work ( )_____ Home ( )_____

Email Address _____

Information for Statistical Reporting

o Male o Female	o Asian or Pacific Islander	o Multi-ethnic
Date of Birth: _____	o Black Non-Hispanic	o White Non-Hispanic
Marital Status: _____	o Hispanic	o Other
Denomination: _____	o American Indian/Alaskan Native	

Registration Status:

o registering as an EfM student for the first time

o registering in a different group after an absence from EfM group*

o registering in the same group after an absence

o registered student transferring to a different

* My former mentor is/was: _____.

* I completed o all / o part of Year _____ and will o start where I left off / o repeat Year _____.

Note: Students registering for the next year on schedule should sign a Re-enrollment form. Do NOT complete this form.

Fees: o Non-Sponsored $460
o Sponsored $350
o Reduced Fee $160

Payment Method(s): Check/M.O (Payable to **EfM**)
Visa, MasterCard, or Discover please complete the Payment Card form.

Overpayments will be considered contributions to the program unless a request for refund is made within 30 days!

I have received a copy of Appendix B-1** explaining my commitment to my group and to the University of the South.

Signature _____ Date _____

This form must be signed before enrollment can be processed. **If Appendix B-1 was not provided by your mentor, please go to *http://www.sewanee.edu/EFM/EFMMentorForms.htm* to view the form.