QUEEN’S COLLEGE
Fall Semester 2017

Instructions: Please complete and submit to the General Office

1. DATE:  _____________________________________________________________

2. NAME:  _____________________________________________________________

3. COURSE SELECTION

   PROGRAM:  ☐ B.Th., ☐ B.Th. by Distance, ☐ B.Th. Discipleship & Ministry ☐ M.Div., ☐ M.T.S.,
               ☐ M.Th., ☐ Cont. Educ., ☐ A.Th., ☐ Diploma in Theology and Ministry, RC Stream,
               ☐ Diploma in Theology and Ministry

   COURSE NO.  TITLE

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   Note: Any balance owing to the college is to be paid in full before registration.

   APPROVAL:

   _____________________________ is permitted to register for the Fall 2017 semester.

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   Provost