

# AUDIT STUDENT APPLICATION FORM

## Canadian Southern Baptist Seminary

Please complete this form if this is your first class with CSBS. This application is for students who wish to take seminary courses but are not seeking enrollment in a degree plan. If you are interested in enrolling in a degree or diploma program, please contact the Admissions Department.

Return with \$10.00 processing fee to:

Registrar  
Canadian Southern Baptist Seminary  
200 Seminary View  
Cochrane, AB T4C 2G1

Name: \_\_\_\_\_  
Last First Middle

Mailing Address: \_\_\_\_\_

Postal Code: \_\_\_\_\_ Email: \_\_\_\_\_

Telephone: \_\_\_\_\_ Soc. Insur: \_\_\_\_\_

### PERSONAL HISTORY

Sex: \_\_\_\_\_ Date of Birth : \_\_\_\_\_

Marital Status: (circle one) Single Married Divorced-Single Divorced-Remarried

### RELIGIOUS HISTORY

Are you a Christian? \_\_\_\_\_

Local Church: \_\_\_\_\_

Member

Denomination: \_\_\_\_\_

### EDUCATIONAL HISTORY

High School: Graduate of \_\_\_\_\_

Name of College or University	Degree	Year
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