

AUDITOR APPLICATION

Center Name & Location _____

Semester _____ Date _____

Student Name _____

Student Address _____

Telephone _____ Birth date _____

Marital Status _____ Nationality _____

Denomination _____

Enrolled in courses for credit? Yes No

Courses to be audited: (Give course number and course title)

Please state your purpose in auditing the course(s):

Requirements: A one-time \$30.00 registration fee and \$100.00 per class audited. Those auditing classes will not have an attendance requirement or be taking test. You will not receive diploma from Midwestern Seminary, but instead a certificate of completion.

Instructor's Signature

CLD Center Director's Signature