

**COURSE OF STUDY FOR ORDAINED MINISTRY 2009-2012  
CORRESPONDENCE/ONLINE ENROLLMENT FORM**

Name \_\_\_\_\_

Address \_\_\_\_\_  
(Street) (City) (State) (Zip)

Home Phone ( ) \_\_\_\_\_ Office ( ) \_\_\_\_\_

E-mail Address \_\_\_\_\_

Conference \_\_\_\_\_ District \_\_\_\_\_

Date and Place of Birth \_\_\_\_\_ PID # \_\_\_\_\_  
(New students e-mail [cos@gbhem.org](mailto:cos@gbhem.org) to receive your PID #.)

Dates Completed: Candidate for Ordained Ministry \_\_\_\_\_

Studies of License Local Pastor \_\_\_\_\_

Ministerial status:

Full-time local pastor \_\_\_\_\_  
Number of Years \_\_\_\_\_ Dates \_\_\_\_\_

Part-time local pastor \_\_\_\_\_  
Number of Years \_\_\_\_\_ Dates \_\_\_\_\_

Student local pastor \_\_\_\_\_  
Number of Years \_\_\_\_\_ Dates \_\_\_\_\_

Please put a check after the course number for which you are registering:

<u>1st Year</u>	<u>2nd Year</u>	<u>3rd Year</u>	<u>4th Year</u>	<u>5th Year</u>
#111 <input type="checkbox"/>	#211 <input type="checkbox"/>	#311 <input type="checkbox"/>	#411 <input type="checkbox"/>	#511 <input type="checkbox"/>
#112 <input type="checkbox"/>	#212 <input type="checkbox"/>	#312 <input type="checkbox"/>	#412 <input type="checkbox"/>	#512 <input type="checkbox"/>
#113 <input type="checkbox"/>	#213 <input type="checkbox"/>	#313 <input type="checkbox"/>	#413 <input type="checkbox"/>	#513 <input type="checkbox"/>
#114 <input type="checkbox"/>	#214 <input type="checkbox"/>	#314 <input type="checkbox"/>	#414 <input type="checkbox"/>	#514 <input type="checkbox"/>

**Written material must be submitted to the Course of Study Office within ONE YEAR of registration.**

**Tuition fee is \$150 per course for correspondence.**

Tuition fee enclosed \$ \_\_\_\_\_ (No refunds)

**Would you prefer to complete this course online? Yes \_\_\_\_\_ No \_\_\_\_\_**

**Courses available at this time: 111, 211, 311, 411 and 511.**

**Cost is \$175 per course. (No Refunds)**

**If you have questions or request information please email at [cos@gbhem.org](mailto:cos@gbhem.org)**

Enrollment approved by:

\_\_\_\_\_  
Signature of registrar of Conference Board of Ordained Ministry

\_\_\_\_\_  
Date

Address \_\_\_\_\_  
Street City State Zip

\_\_\_\_\_  
Signature of District Superintendent

\_\_\_\_\_  
Date

Address \_\_\_\_\_  
Street City State Zip

The Course of Study for Ordained Ministry  
General Board of Higher Education & Ministry  
The United Methodist Church  
P.O. Box 340007, Nashville, TN 37203-0007