

APPLICATION FOR BI-REGISTRATION AT THE UNIVERSITY OF CHICAGO

Bi-registration allows students at neighborhood theological schools to register for courses at the University of Chicago through its Divinity School.

Part I

(To be completed by the student applying for bi-registration)

Name of Student: _____ UC Student Number: _____

Email Address: _____

Local Address: _____ Phone: () _____

Birthdate: _____ Social Security #: _____ Citizenship: _____

I hereby make application for registration in the following course(s) under the terms of bi-registration.

Subject Code	COURSE NO.	COURSE TITLE	INSTRUCTOR
<i>Example: THEO</i>	<i>48000</i>	<i>Ethics, Religion, Psychoanalysis</i>	<i>Tracy et all</i>

I also authorize the University of Chicago to forward a copy of this student's transcript upon request.

Signature of Student

Office of the Registrar
 Meadville Lombard Theological School
 5701 S. Woodlawn Ave.
 Chicago, IL 60637

PART II

(To be completed by Registrar)

As Registrar of **Meadville Lombard Theological School**, I certify that the above student is in good standing and a candidate for the _____ degree. I recommend this application for bi-registration in the course(s) listed above.

Registrar

Date