

REQUIRED SIGNATURES PAGE 2024-2025

Please attach this form to your online registration or submit via email when complete. All required signatures must be obtained, or your registration will not be complete.

COSS email: coss(wsmu.edu				
Student Name:	nt Name:			Student E-mail:	
Annual Conference:Distr		District:		Church:	
Courses Attending	g (check one): Sessio	n ISession II	Both Sessions		
List the Course(s)	you are enrolling i	n (include number, c	ourse title and ses	sion):	
Course Number	Course Title				
1.					
2.					
3.					
4.					
be allowed to attend cl that I and/or my annua understand that I am ro of Study School to sub General Board of High Required Signature	asses if my registration l conference will remain esponsible for securing whit grades of my compare Education and Ministres:	materials and pre-class n responsible for any and my own housing arrange pleted courses to my Dist stry of the United Metho	assignments are not produced all costs pertaining to the ments if I choose to sometic Superintendent, Codist Church.	se of Study School. I further understand that I will no roperly completed and submitted by the deadline, and o my registration if not cancelled by the deadline. I tay off campus. I authorize Perkins Regional Course conference Board of Ordained Ministry and the	
Local Pastor Registrar			Email:		
2024-2025 Fees – Us will cover.	e the following table	to calculate your total	l costs and to calcula	ate what you and/or your conference	
Required Registration Fee \$100 pe		\$100 per session,	non-refundable		
		\$300.00 per Basic \$400.00 per Advar			
Total Fees due to Perkins COSS:			\$		
All fees due to Perkins before classes begin Conference Contribution of Total Fees (required)			\$		
Student Contribution of Total Fees (required)			\$		

If you have any questions, or need help calculating your costs, call us at 214-768-2222 or email coss@smu.edu.