



Student Enrollment Agreement

2075 EAST MADISON AVE EL CAJON, CA 92019
PHONE: (619) 201-8951 FAX: (619) 201-8975
Email: registrar@socalsem.edu Web: www.socalsem.edu

Please read carefully and complete fully.

Last Name _____ First _____ Initial _____ Student ID # _____

Street _____ City _____ State _____ Zip _____ New address?

Phone _____ Check box if new phone number? Emergency Phone _____

Please complete all 7 questions as these are required by the US Government for reporting purposes. Thank you.

1. Degree: AABS BABS MRS MABS MACP MFT MDIV PSYD Non-Degree Auditing Course

2. Course Load: Full-time Part-time 3. Citizenship Status: I am an F1 student I am an American citizen.

4. Gender: Male Female 5. Age: _____ 6. Ethnicity: I am Hispanic/Latino I am not Hispanic/Latino

7. Race: American Indian/Alaska Native Asian Black/African American Native Hawaiian/Pacific Islander

White Two or more races Unknown

Course Enrollments:

Mod	Course Code	Sec-tion	Course Title	Start Date	Site Code	Credit Y / N	# of Units	Amount
								\$
								\$
								\$
								\$
								\$

Tuition Subtotal \$ _____

Fees (Administrative use only):

	\$
	\$
	\$
	\$

Total charges include standard tuition and fees. Cost of living and textbooks are not included.

Total Charges \$ _____

Site Codes for above boxes

EC SCS Main Campus 2075 E. Madison Avenue El Cajon, CA 92019	OL On Line	LA 3600 Wilshire Blvd Ste 1614 Los Angeles, CA 90010	MI (Military) Write in location below _____
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This agreement is a legally binding contract when signed by you and accepted by SCS.

You will be given a copy for your records. By signing this agreement you acknowledge that (a) you had reasonable time to read and understand it, and (b) that you are aware that you have access to a current catalog via the Seminary's website containing a description of the courses or educational services hereby agreed to.

Student Signature _____ Date _____

Student Advisor Signature _____ Date _____

Division Dean Signature _____ Date _____

Student Accounts Officer _____ Date _____

Important Notice: SCS will only use our students' on-campus email addresses (socalsem.edu) to initiate email contact.