



DL School of Ministry - DL SM Bible College

*International Multi-Denominational
Becoming Educated Representative of God*

Registration / Enrollment Form

Date and time you are submitting this Registration / Enrollment Form:

M D Y Time

Name

First: _____

Middle: (if applicable) _____

Last: _____

I am 18 years of age or older Yes _____ No _____

- If you are under the age of 18 and seeking enrollment, contact the administrative office for further instructions

Identification

- USA State ID or drivers license number: _____
- International ID or drivers license number: _____

Contact Information

Telephone _____ Cell _____ Text (if applicable) _____

Email _____

Fax (if applicable) _____

Address: _____ City _____ State _____ Zip Code _____

International Mailing Address (if applicable)

Previous Education

Level of Education High School Diploma / GED _____ Undergraduate _____ Graduate _____

Other _____ if other, please explain _____

Payment Plan

Select your enrollment payment plan

- Monthly
- Pay As You Go
- 50%
- 100% Paid In Full
- Special Admission / Scholarship

Reminder

- Please submit all required documentation to the Administrative office so there are no delays in processing your registration/enrollment application.

By checking yes, I understand I am registering for enrollment into DLSM - Distance Education Program in the Bible College Department. Yes

Signature of Applicant

Date

Looking forward to your academic/spiritual success!

In His service and yours,
DL School of Ministry-DLSM Bible College & Seminary

Tel: administrative office - 615.592.1370 / Toll Free - 877.343.8003

Email: admin@dlschoolofministry.com

Fax: 615.514.9647