SSM-Atlanta Student Information Form

Personal Information (please print):								
Last Name:	First Name:	MI:						
Student ID Number:	Social Security Number:							
Birthdate (M/D/Y):	Marital Status:	Gender:						
US Citizen? Yes □ No □	Citizenship (if not US):							
Address:								
City:	State:	Zip:						
Country:	E-mail:							
Home Phone:	Work Phone:							
Emergency Contact Information (please print):								
Name:	Relation:							
Address:								
City:	State:	Zip:						
Home Phone:	Work Phone:							
Educational Information (please print):								
List each post-secondary school attended,	dates, and degree earned:							
1								
2.								
3.								
Note: Students must have a bachelor's degree (or an official transcript from the school at whe Registrar's Office Columbia International University Post Office Box 3122 Columbia, SC 29230-3122 You will not receive a CIU transcript unless	ich they earned their highest level of educ	cation sent to:						

- Acceptance for SSM-Atlanta June 2012 courses does not imply acceptance for other study at Columbia International University. Normal application procedures are required for enrollment in regular semesters.
- Submission of this form constitutes registration. If you are unable to attend after registration, it is important that you notify the Registrar's Office by phone at 1-803-807-5033 or e-mail registrar@ciu.edu to avoid being billed.
- By submitting this form, I am stating that I am a committed Christian and I agree to conform to the doctrinal and life standards of the university community while enrolled. I will cooperate in maintaining high spiritual, moral, social, and academic standards.

SSM-Atlanta Course Selection Form

		TTEET 1: (Gain	e 18-22, 2012)	
	HIS 6221 History	of Global Chris	stianity 1 with Dr. Bill Davidson.	
	• Credit	\$900.00		
	Audit	\$375.00		
	You <u>must</u> choose a Meal and	Room Option or you	will automatically be billed the Commuter	fee.
	Commuter: \$110.00 (include	s morning break,	unch, afternoon break)	
	Single occupancy* + meals a	nd breaks: \$ 400.0	0 (Breakfast, Lunch, Dinner, 2 breaks per	day
	Double occupancy* + meals	and breaks, \$ 275	00 (Breakfast, Lunch, Dinner, 2 breaks pe	er da
*= ,	All Linens & towels provided	☐ Please indicate	if you have special needs for classroom o	or lo
	1	Weekend Hous	ng and Meals:	
	☐ Room + Continental Bre	eakfast <u>only</u> for S	Saturday and Sunday, June 23-24 \$ 5	0.00
		WEEK 2: (June	25-29, 2012)	
	HIS 6231 History	of Global Chris	stianity 2 with Dr. Bill Davidson.	
	1110 0201 11101019	or alobar orm	Sharinty 2 with Br. Bill Baviason.	
	• Credit	\$900.00		
	CreditAudit	\$900.00 \$375.00		
	CreditAudit	\$900.00 \$375.00		fee.
	CreditAudit	\$900.00 \$375.00 Room Option or you	u will automatically be billed the Commuter	fee.
	 Credit Audit You <u>must choose a Meal and and and and and and and and and and</u>	\$900.00 \$375.00 Room Option or you s morning break,	u will automatically be billed the Commuter	
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<u> </u>	 Credit Audit You <u>must choose a Meal and and and and and and and and and and</u>	\$900.00 \$375.00 Room Option or you s morning break, nd breaks: \$ 400.0 and breaks, \$ 275	u will automatically be billed the Commuter of the unch, afternoon break) O (Breakfast, Lunch, Dinner, 2 breaks per	r dav er da
*= ,	 Credit Audit You <u>must choose a Meal and and and and and and and and and and</u>	\$900.00 \$375.00 Room Option or you s morning break, nd breaks: \$ 400.0 and breaks, \$ 275 Please indicate	u will automatically be billed the Commuter of	daver dav
*= .	 Credit Audit You <u>must choose a Meal and and and and and and and and and and</u>	\$900.00 \$375.00 Room Option or you s morning break, and breaks: \$400.0 and breaks, \$275 Please indicate U is limited in the many	u will automatically be billed the Commuter of the unch, afternoon break) O (Breakfast, Lunch, Dinner, 2 breaks per commuter) of (Breakfast, Lunch, Dinner, 2 breaks per commuter)	r day er da or lo e. A
= A	Credit Audit You must choose a Meal and a Commuter: \$110.00 (include Single occupancy + meals a Double occupancy* + meals All Linens & towels provided ause of accrediting guidelines, CII be enrolled on a space available to	\$900.00 \$375.00 Room Option or you s morning break, and breaks: \$400.0 and breaks, \$275 Please indicate U is limited in the more	unch, afternoon break) (I) (Breakfast, Lunch, Dinner, 2 breaks per one) (I)	r day er da or lo e. A may

AccessCIU Office, Attn: James Wilson Columbia International University Post Office Box 3122 Columbia, SC 29230-3122

Make checks payable to: Columbia International University

Return both forms and your payment no later than 5:00 p.m. EDT on Tuesday, May 8, 2012 to: