

United Divine Science Ministerial School  
1400 Mercantile Lane, Suite 220  
Largo, MD 20774  
301-602-8167

REGISTRATION FORM

Please fill out the form below for admission into the Seminary:

Full Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Gender: Male \_\_\_ Female \_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_

State/Province: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Country: \_\_\_\_\_

Phone Number: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

How did you learn about the Seminary? Website \_\_\_ Friend \_\_\_ Conference \_\_\_

Advertisement \_\_\_ Other \_\_\_\_\_

When would you like to enroll? \_\_\_\_\_

Academic Goal:

\_\_\_\_\_ Correspondence Student

\_\_\_\_\_ Non Certification

\_\_\_\_\_ Minister

\_\_\_\_\_ Practitioner

\_\_\_\_\_ Teacher

Other \_\_\_\_\_

Education: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_