



HOLY SPIRIT

COLLEGE

COURSE REGISTRATION FORM

Name: _____

Address: _____

Phone: _____

E-mail: _____

Term / Year:
Fall 2018

Degree Program:
MTS

Course Number	Section Number (If Applicable)	Course Title	Course Instructor
THEO 505 and THEO 515		Introduction to Theology and Fundamental Theology (3 cr.)	Dr. Chris Gustafson
<i>Note: We have merged two required courses into one 3 credit course enti-</i>			

Please check one of the following:

Auditing

For Credit

Catechetical Certification

Student Signature: _____ Date: _____

College Official Signature: _____ Date: _____

Please return to: Kim Schulman - Registrar
Holy Spirit College
4465 Northside Dr., NW