EXCEL

Missouri Baptist UNIVERSITY | Dual Credit

Due Date:

- Please answer each of the following questions in its entirety. The EXCEL Program reserves the right not to process incomplete registrations.
- This form does not serve as or replace the Missouri Baptist University Application for Admission & Financial Aid.

Term: ☐ Fall 2017 ☐ Full Year 2017-2018 ☐ Spring 2018

Status: ☐ First time to enroll in EXCEL ☐ Enrolled in EXCEL previously

Grade Level: ☐ Freshman ☐ Sophomore ☐ Junior ☐ Senior

High School: HS Graduation (Year): *20*

For Office Use Only:
Student ID

1) Social Security Number _____ - _____ - _____

*Please verify SSN is correct when completing form; this number is NOT used for the Student ID, but IS required for tax purposes.

2) Date of Birth _____ _____ _____ Preferred E-mail _____ @ _____
Month Day Year An email address is required. Please do NOT use your high school address.

3) Full Legal Name _____
Last First Middle

4) Billing Address _____
Street City State/Zip Code+4

☐ Check here if you are a previous EXCEL student and your address has changed since you last enrolled in EXCEL.

5) County of Residence _____ 6) Parent/Guardian Name(s) _____

7) Home Phone ( ) _____ _____

8) Parent Phone ( ) _____ List person(s)with whom we may discuss account and academic affairs.

The information in questions (9) through (12) is requested for reports the University provides to Federal and other agencies collecting data to assure equal opportunity. You are not required to answer these questions; however, your cooperation is appreciated. Information provided voluntarily will not be used in a discriminatory manner.

9) Country of Citizenship _____ If not U.S.A., indicate VISA type: _____

10) Are you Hispanic/Latino? ☐ Yes ☐ No

a) If you answered yes, please select one or more from the following: ☐ Non-resident alien ☐ Hispanic of any race

b) If you answered no, please select one or more from the following: ☐ Non-resident alien ☐ American Indian/Alaskan Native ☐ Asian ☐ White ☐ Black/African-American ☐ Native/Other Pacific Islander ☐ Two or more races

11) Gender ☐ Male ☐ Female 12) Religious Preference _____

MBU Course #	MBU Course Title	Semester/Full Year	Instructor	Credit Hours
EXCEL Coordinator/HS Principal: If student is enrolling for ENGL 113, please list qualifying ACT score here. →				

Payment options

☐ Pay at time of registration: Include check or money order payable to Missouri Baptist University. ***Please allow 4-6 weeks for completion of processing.

☐ Please bill me

Pay by credit card, e-check or check. Within 4-6 weeks you will receive an e-mail with instructions for online payment. To pay by phone, you may call 314-392-2203.

Tuition

$65 X _____ (credit hours) = $_____ (total)

For Office Use Only:
Payment Method
Check # _____ Amount _____
Credit Card ☐ Payment Online ☐

I hereby give Missouri Baptist University permission to send my account statements to the parent(s)/guardian(s) listed above and to discuss my account and academic affairs with the parent(s)/guardian(s) listed above. See student rights and responsibilities in the EXCEL Guide for Students at www.mobap.edu/excel.

Student Signature:

Parent/Guardian Signature:

Parent E-mail:

EXCEL Coordinator/
HS Principal: Date:

EXCEL Coordinator/HS Principal
Please list student's GPA: _____

All grades (A-F) will be recorded on a MBU transcript. Transcripts for these courses must be requested in writing by the student.

EXCEL Office
Missouri Baptist University • One College Park Drive • St. Louis, MO 63141-8698
(314) 392-2203 • excel@mobap.edu
www.mobap.edu/excel

White Copy - Missouri Baptist University Yellow Copy – High School Pink Copy - Student