



**D.Min. Student Enrollment Agreement (註冊合同)**

2024 D.Min. Summer Semester (May 1, 2024 – August 20, 2024)

**Student Name (English)** \_\_\_\_\_ **(名字)** \_\_\_\_\_ **Student I.D. #** \_\_\_\_\_ **Program:** \_\_\_\_\_

**Tel :** \_\_\_\_\_ **E-mail address:** \_\_\_\_\_

**In case of emergency, contact 緊急聯絡人:**

**Name:** \_\_\_\_\_ **Relationship to the Student:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

COURSE #	COURSES ENROLLED	UNITS	CLASS Room #

**Total Units Enrolled:** \_\_\_\_\_

**Nonrefundable Charges:**

Application Fee: \_\_\_\_\_  
 Challenge by Test Fee: \_\_\_\_\_  
 Deferred Payment Plan Fee: \_\_\_\_\_  
 Late Payment Fee: (\$25 & up) \_\_\_\_\_  
 Thesis/Dissertation Extension Fee : \_\_\_\_\_  
 Program Extension Fee : \_\_\_\_\_  
 Petition for Term Paper Extension: \_\_\_\_\_  
 Continuation/ Semester: \_\_\_\_\_  
 Course Material Fee : \_\_\_\_\_  
 Others : \_\_\_\_\_

**Nonrefundable Charges:**

Late Registration Fee: \_\_\_\_\_  
 Add/Drop Fee: \_\_\_\_\_  
 Administration Fee **\$50 / \$100**

**Refundable Charges** : (see Refund Schedule)

**Tuition** : \_\_\_\_\_  
 Credit : \_\_\_\_\_  
 Others : \_\_\_\_\_  
**TOTAL CHARGES** : \_\_\_\_\_  
**TOTAL RECEIVED** : \_\_\_\_\_

I hereby certify that Logos Evangelical Seminary has met all disclosure requirements required by section 94911 of California State Education Code.

\_\_\_\_\_  
*Jane Peng*      5/1/2024  
 Academic Dean      Date

I understand that this is a legally binding contract. My signature below certifies that I have read, understood, and agreed to my rights and responsibilities, and that the institution cancellation and refund policies have been clearly explained to me. 學生需明白各款項和準時付清個人Populi帳上餘額 (逾期有罰款)

\_\_\_\_\_  
**Signature of Student (學生簽名)**      **Date**

填好表格簽名後請電郵 email Form to [registration@les.edu](mailto:registration@les.edu)