BIBLE SCHOOL ON WHEELS #1

Student Registration Form

TEACH EVERY NATION

Please print 1 letter per box.

Take a picture of the completed form and text/WhatsApp to +27-73-923-2922 or email to student@teacheverynation.org. Also send a picture of yourself!

Student ID# (Cell Number) +_____---_____---_____---_____

1. Your Given or First Name:

2. Your Surname or Last or Family Name:

3. Today's Date: d d m m y y y y

4. Birth Date: d d m m y y y y

5. Circle: Man Woman

6. Home Address:

7. City or Town:

8. Province or Region or State - spell out:

9. Country - spell out:

10. Email:

11. Name of Your Dean Surname or Last or Family Name:

12. Name of TEN Training Center, church, or school where classes usually conducted:

1. How many of the 10 BSOW#1 courses are you planning to attend?	Circle: 1 2 3 4 5 6 7 8 9 10
2. Do you plan on applying to become a TEN Missionary and show courses to others?	Yes No
3. Will you be able to go online and download the 5 Elective courses and workbooks?	Yes No
4. What topic would you like TEN to make a new course?	
5. Which of the 10 courses do you think will be your favorite?	

To register and earn your Certificate, take 5 Core courses and at least 2 Electives, and send this form along with your Course Completion Record to TEN.