



Kingdom Bible Institute and Seminary and Training Center

5659 South Union Avenue - Chicago, Il. 60621

Tel: 312.534.4414 – Email: info@kbistc.org

COURSE TRACKING & INTENT TO GRADUATE FORM

IMPORTANT: This form is required of all students intending to graduate in a given school year. Enclosed with this form is the Course Tracking Sheet, which should be completed and signed by the Administrator and reviewed by the student for accuracy and signature. Copies are to be given to the student, kept at the teaching site, and the original is to be forwarded to our records office. Accurate height and weight must be included for proper gown size. Please keep a photocopy for your records. All information enclosed on this sheet is confidential.

Graduation fee: \$175.00 THIS FEE IS DUE WITH THIS FORM

PERSONAL INFORMATION

Date: _____

Your School Name: _____

Last Name:	First Name:	Middle Initial:

Address:	City:	State:	Zip Code:

Date of Birth:	Place of Birth:	Social Security # (last 4 digits only)

Home Phone #:	Work Phone #:	E-Mail Address:

High School/GED	City:	State:	Zip Code:

Your Height (ft/in)	Weight (lbs)	Degree (Associate, Bachelor, Master, Doctorate)

Print your name exactly as you wish it to be on the Document (NO TITLES)

SIGNATURES

Student Signature:	Administrator Signature:

I certify that the information above is correct. _____ Date	I certify that the information above is correct. _____ Date
---	---

BE SURE TO COMPLETE PAGE 2 OF THIS FORM. ADMINISTRATORS MUST INITIAL & SIGN FOR VALIDATION.

