## Application Form: Wesleyan Studies Summer Seminar

Lifelong Learning 888.5BEESON lifelong.learning@asburyseminary.edu

NAME (LAST, FIRST, MIDDLE)	SOC. SEC. # (IF AVAILABLE)	BIRTH DATE (MONTH/DAY/YEAR)
ADDRESS		
EMAIL		
DAYTIME PHONE:	ALTERNATE PHONE	FAX
CITIZENSHIP*		
*Asbury Theological Seminary does no Seminary can provide a letter of invitar	ot provide visa sponsorship for the Wesleyan St tion for the visa application process.	udies Summer Seminar. However, the
AFFILIATION		
POSITION		
LIST ANY RECENT PUBLICATIONS		
PROJECT TITLE		
BRIEFLY DESCRIBE YOUR PROJECT (ATTACH SEPAR	ATE SHEET IF NECESSARY)	
	that would require your absence during your pla	nned attendance? • YES • NO
If so, please give the dates:		·
Do you need housing? O YES	O NO	
Do you have any food allergies or do you  If so, please explain:		
(There will be a meal together on each e	vening the seminar meets; these meals are free.)	

Please submit this form by *January 16th*, *2023* along with an application fee of \$50.00. The application fee is waived for international researchers.

Make checks payable to Asbury Theological Seminary. Applications should be returned to:

Kenneth J. Collins Asbury Theological Seminary 204 N. Lexington Ave. Wilmore, KY 40390

