|  |  |
| --- | --- |
| Slide1.JPG | Report of StudentsAttending Colleges or Universities |
| Church: |  |
| Charge: |  |
| Pastor: |  |

## Student Information

|  |  |  |  |
| --- | --- | --- | --- |
| Full Name: |  | Date: |  |
|  |  |  |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Mobile #: |  | Email: |  |

## College Information

|  |  |  |  |
| --- | --- | --- | --- |
| Name of College: |  | Current Major: |  |

|  |  |
| --- | --- |
| Address: |  |

## References

|  |  |
| --- | --- |
| Referred By: |  |
|  |  |
| Relationship to Student: |  |
|  |  |

## Church Information

|  |  |
| --- | --- |
| Home Church Name: |  |
| Address: |  |

|  |  |
| --- | --- |
| Home Church Pastor: |  |

## Signature

Signature indicates permission for this form to be filled out, submitted to CBHECM, and student information to be sent to the appropriate local United Methodist campus pastor and/or United Methodist pastor

|  |  |  |  |
| --- | --- | --- | --- |
| Signature of Home Church Pastor: |  |  |  |
|  |  |  |  |
| Signature of Referral *(if not pastor)*: |  |  |  |
|  |  |  |  |
| Signature of Student: |  |  |  |
|  |  |  |  |