

**School of Mission and Theology**  
**REGISTRATION FORM FOR EXAMINATION**

This form should be handed in  
to the MHS reception within the end of each period's second week.

Name: \_\_\_\_\_

Norwegian ID number: \_\_\_\_\_

Telephone: \_\_\_\_\_ / mobile: \_\_\_\_\_

E-mail: \_\_\_\_\_

Name of course: \_\_\_\_\_

Code number: \_\_\_\_\_ credits /ECTS: \_\_\_\_\_

The Course belongs to module: \_\_\_\_\_

Code number: \_\_\_\_\_

Exam week: \_\_\_\_\_ (The MHS administration decides the exact day)

What form of exam (se in the course description): \_\_\_\_\_

Special regulations/requirements : \_\_\_\_\_

Name of course: \_\_\_\_\_

Code number: \_\_\_\_\_ credits /ECTS: \_\_\_\_\_

The Course belongs to module: \_\_\_\_\_

Code number: \_\_\_\_\_

Exam week: \_\_\_\_\_ (The MHS administration decides the exact day)

What form of exam (se in the course description): \_\_\_\_\_

Special regulations/requirements : \_\_\_\_\_

Stavanger (date): \_\_\_\_\_ Signature: \_\_\_\_\_