

ENROLLMENT INTENT FORM FOR NEW STUDENTS

To reserve your place for the fall 2017 semester, please complete this form and return it to the Stevenson University Admissions Office along with your enrollment deposit. A pre-addressed envelope is included for your convenience.

The enrollment deposit of \$300 is due by May 1, 2017 and is non-refundable after that date. Include a check or money order payable to Stevenson University. You may submit the deposit via credit card using the SU Credit Card Payment Form. You can also complete this form and pay your deposit securely online at: <http://stevenson.edu/letusknow>. If you submit the form online, you do not need to mail in this version. The deposit will be deducted from your fall 2017 tuition bill.

Questions? Contact Sue Rubino, Director of Enrollment Operations, at 443.352.4404 or srubino@stevenson.edu.

Student Name: _____
SU ID: _____
Intended Major (if known): _____

◇ YES! I will be a student at Stevenson starting in fall 2017.

I have enclosed my \$300 Enrollment Deposit in the form of a:

- o Check
- o Money Order
- o SU Credit Card Form

Please reserve a space for me as a:

- o Resident Student
*(You must also complete the Housing Reservation Form.)
The Office of Residence Life will contact you over the summer to complete a questionnaire for room and roommate assignment. All new students will be enrolled in the SU "A" Block Meal Plan.*
- o Commuter Student
A commuter student meal plan (60 meals and 175 flex dollars per semester) is available. The exact cost for 2017-2018 will be determined in March; the current cost is \$995 per semester. Would you like to participate?
 - Yes
 - No

◇ No, I will not be attending Stevenson University. I will be attending _____.

To what other colleges or universities were you accepted?

I hereby authorize Stevenson University to a Student Account and official billing in my name. I understand and agree to pay for assessed tuition, fees, and any costs associated with residence or dining by the published due dates.

Student's Signature _____ Date _____