

Intent to Pay For Courses Form

Date*

Last Name*

First Name*

Student EMPLID #*

Please select the semester that applies:*

Fall 2014 Spring 2015 Summer 2015

If New Student
Please Select One:

Undergraduate New Freshman Graduate
 Undergraduate New Transfer Doctoral
 Non Applicable

If Continuing
Please Select One:

Undergraduate
 Graduate
 Doctoral
 Non Applicable

Please Check
if Applicable:

Veteran Accessibility
 Honors Fullbright
 Macaulay Other (3rd party scholarship)

Please Identify Scholarship Source:

I am planning to attend in the semester checked above and understand that I am responsible for the tuition and fees. I am waiting for payment to be received from:

Identify Payment Source Here:

Signature

Date

Please return the completed form to the Office of the Bursar, A-103.