

Please inform us of your intention to enroll in the Global Pathway Program at DePaul University by completing this form and submitting it to depaul@echigher.com

Personal Information

| | | | |
|----------------|---|--|---|
| First Name | <input type="text"/> | Middle Name | <input type="text"/> |
| Last Name | <input type="text"/> | | |
| Street | <input type="text"/> | | |
| City | <input type="text"/> | | |
| State/Province | <input type="text"/> | Postal Code | <input type="text"/> |
| Country | <input type="text"/> | | |
| Student Email | <input type="text"/> | | |
| Phone Number | <input type="text" value="COUNTRY CODE"/> | <input type="text" value="AREA CODE"/> | <input type="text" value="PHONE NUMBER"/> |

Enrollment Decision

I am **accepting** DePaul University's offer of admission to the Global Pathway Program.

I plan to start in:

Fall 2019 Quarter (September - November) Winter 2020 Quarter (January - March)

Summer 2020 Quarter (June - August)

Graduate students Only (undergraduates are required to live in residence):

I plan to:

Live at the University Center (in residence) Live off-campus

My plans have changed since I submitted my application. I would like to **decline** my offer to the Global Pathway Program at DePaul University.

I plan to attend:

I would like to **defer** my enrollment.

I request to start in:

Comments

Student Signature _____

Date