

# MARIST

## DECLARATION OF EARLY DECISION

**YOUR SIGNATURE BELOW ACKNOWLEDGES UNDERSTANDING AND ACCEPTANCE OF THE FOLLOWING STATEMENT:**

*I hereby certify that Marist is definitely my first choice of colleges and that, if accepted, I intend to enroll. I further understand that if I am accepted, I will be required to:*

*1) pay a nonrefundable \$500 enrollment deposit by February 15th to reserve my place in the first-year class, and 2) withdraw all pending applications to other colleges. All three signatures are required.*

*(Please print full name)*

Applicant printed name: \_\_\_\_\_ Date: \_\_\_\_\_

Applicant signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent signature: \_\_\_\_\_ Date: \_\_\_\_\_

Counselor signature: \_\_\_\_\_ Date: \_\_\_\_\_