



CLASS OF 2019
ENROLLMENT RESERVATION FORM

Please return this form with your deposit, postmarked by May 1, 2015, to:

John Carroll University
Office of Undergraduate Admission
1 John Carroll Boulevard
University Heights, OH 44118

OR visit jcu.edu/deposit to submit your enrollment reservation form and deposit online via credit card.

Banner ID:

Name:

Address:

City, State, Zip:

Home Phone:

Cell Phone:

Preferred Email:

I plan to enroll at John Carroll University!

Residency Status:

- I intend to... Live on campus. Enclosed is my \$300 enrollment deposit in the form of a check made payable to John Carroll University.\*
Commuter from home. Enclosed is my \$300 enrollment deposit in the form of a check made payable to John Carroll University.

\* \$200 of this deposit will be placed as a Security Deposit for Residential Students. The other \$100 serves as an advance payment on your first semester tuition bill.

I do not plan to enroll at John Carroll University. Please withdraw my application. Instead, I will be attending:

College / University

City / State

You can also visit jcu.edu/withdraw to submit this form and officially withdraw your application to JCU.

Student Signature:

Date: