



## Graduate and Professional Studies Enrollment Form

Please complete and return this form with your payment to confirm your interest in attending SIT Graduate Institute. If you are paying by credit card, you may email the contents of this form to [admissions@sit.edu](mailto:admissions@sit.edu)

Name (please print): \_\_\_\_\_

Program: \_\_\_\_\_

- I have been accepted and want to reserve my place in the class by paying my non-refundable \$400 enrollment deposit. I understand my deposit will be applied to my first semester bill.

\_\_\_\_\_ Check/money order for \$400 is enclosed. (Make check payable to the SIT Graduate Institute.)

\_\_\_\_\_ I would like to pay by credit card. (See enclosed form for details.)

- I will not be attending the SIT Graduate Institute.

I will be attending: \_\_\_\_\_

I confirm that between now and the start of classes, I can be reached at:

- Check this box if you are providing updated information.**

Address: \_\_\_\_\_

\_\_\_\_\_

Email (**very important**): \_\_\_\_\_

Telephone: (home) \_\_\_\_\_ (cell): \_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_