



ENROLLMENT CONFIRMATION FORM

Please read, sign, and return this document

Mail:
Hartwick College
P.O. Box 4022
Oneonta, New York 13820, USA

Email: admissions@hartwick.edu
or
Fax: 607-431-4102 or 607-431-4154

Name (Print): _____

Address: _____

Student ID: _____

I plan to attend Hartwick College for the fall of 2018. I understand that:

- 1) my non-refundable enrollment deposit will be applied to my first semester bill,
- 2) my enrollment is contingent upon proof of final high school graduation and submission of official high school and/or college transcripts and,

I submitted my \$400 enrollment deposit online at www.hartwick.edu/deposit

OR

I have enclosed my check made payable to **Hartwick College**.

Student Signature

Date

Parent/Guardian Signature (if student is under age 18)

Date