



INTERNATIONAL STUDENT ADMISSIONS OFFICE

LIU Hudson
70 Route 340
Orangeburg, NY 10962
Carolyn.reiter@liu.edu

**INTERNATIONAL STUDENT
Graduate Intent to Enroll For**

For Admitted Students

I plan to enroll at LIU's Hudson Campus for: Fall Spring Summer Year _____ (YYYY)

First Name _____ Middle Name _____ Last Name _____

Student ID Number: _____ Admitted Program _____

Admitted international pharmaceuticals students are required to submit a non-refundable tuition deposit of \$500.00 to hold a seat in the entering class.

I have enclosed my tuition deposit to reserve a place in the entering class. This money will be credited toward my tuition. I understand that this deposit is not refundable should I decide at a later date not to attend the university*

I cannot enroll this semester at this time. Instead, please consider my application for: Fall Spring Summer Year: _____ (YYYY)

I will not be attending LIU Hudson. Reason: _____

Signature: _____ Date: _____

*(Deposits will only be refunded if LIU Hudson does not offer the program you have been admitted to for the semester you applied for)