



Office of Recruitment, Admissions and Programming
Intent to Enroll

Term: _____ Fall (August) _____ Spring (January) Year _____

Please complete this form and return it to the Office of Recruitment Admissions and Programming by May 1st (Fall Term) December 1st (Spring Term) or within two weeks of acceptance

Name _____ Dillard University ID # _____

Address _____ City _____ State _____ Zip _____

Phone () _____ - _____ Cell () _____ - _____

Personal Email Address (Not School Email) _____

Intended Major _____

Please indicate your intention to enroll in Dillard University by selecting the appropriate response below:

_____ **I accept the offer of admission for the term:** Fall/Spring: _____ Year: _____

Reason for attending Dillard: _____

_____ **I decline the offer of admission for the term:** Fall/Spring: _____ Year: _____

Reason for not enrolling, include college you plan on attending: _____

(College/University attending instead of Dillard University) _____

SUBMISSION OF REQUIRED FEES:

A New Student Enrollment Fee of **\$150.00** is required of all new students. **This fee is Non-Refundable.** On-Campus students should complete the *Application for Housing*. Please contact the Office of Residential Life at housing@dillard.edu or 504-816-4734 to obtain the *Application for Housing*. Receipt of enrollment fee payment by May 1st will secure your space in the residence hall. After May 1st all students will be placed on a waiting list by Residential Life.

To submit your enrollment fee, please complete the following steps:

1. Locate the "MyDU" on the bottom right side our homepage at www.dillard.edu
2. Locate the "Make a Payment" link on the left side of the page on the menu options.
3. In the "Apply Payment Toward" box, select "New Student Enrollment Fee (\$150).

Once your payment has been made, the funds will be added to your account. If you have any questions or concerns, please contact the **Bursar's Office at bursar@dillard.edu**. If paying by check or money order, make payable to **Dillard University** and mail payment and Intent to Enroll Form to **Dillard University, Office of Recruitment, Admissions and Programming, 2601 Gentilly Blvd., New Orleans, LA 70122.**

**By signing below you grant Dillard University the authorization to produce, reproduce (or reuse), edit videos, take pictures, print, and record sound of you for promotional purposes.*

Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____
(If under the age of 18)