



Early Decision Agreement Form

Please complete and return this form by November 1, 2007. Please type or print in ink.

APPLICANT'S NAME: LAST FIRST MIDDLE INITIAL

SOCIAL SECURITY NUMBER

GUIDANCE/COLLEGE COUNSELOR'S NAME

HIGH SCHOOL

CITY STATE/COUNTRY ZIP/POSTAL CODE

NYU SCHOOL/COLLEGE TO WHICH YOU ARE APPLYING

New York University is my first-choice college, and I am applying to NYU as an Early Decision candidate. I understand that the New York University Early Decision Program is binding. If I am admitted under the Early Decision Program, I agree to withdraw all other college applications I have submitted and pay the required nonrefundable tuition deposit within three weeks of the date of my offer of admission.

My signature on this form certifies that I am a candidate for the Early Decision Program at New York University and that I agree to abide by the conditions stated above.

APPLICANT'S SIGNATURE DATE

PARENT/GUARDIAN'S SIGNATURE DATE

GUIDANCE/COLLEGE COUNSELOR'S SIGNATURE DATE

This form must be returned by November 1, 2007. Please include it with your Early Decision application, if possible. Otherwise, mail it to New York University, Undergraduate Admissions Processing Center, 22 Washington Square North, New York, NY 10011-9191.