

Semester
Study Abroad Acceptance Reply Form

Name: _____ FID#: _____

Program: _____ Semester: _____

Acceptance of this offer of admission and payment of the program deposit will guarantee you a place in the program. Please indicate your intention and return this form by the deadline in your acceptance letter to:

SUNY Fredonia
Student Accounts Office
Williams Center
Fredonia, NY 14063

_____ YES, I accept your offer of admission to the program and enclose my deposit of \$750.00.

_____ NO, I do not wish to participate in the program at this time.

Enclose your check made payable to: SUNY Fredonia Acct. #960003.02
OR

Complete the following to pay by MasterCard or Visa:

Name on Card: _____

Card Number: _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ _ Expiration Date : _____

Security Code (last 3 digits by signature on back of card) _____

Cardholder Billing Address Zip Code: _____

Cardholder Signature: _____

Cardholder Daytime Ph#_(_____)_____ Date: _____

If you plan to use approved/authorized financial aid to help pay for your program abroad, make sure you understand when you will have access to your funds.

Signature _____ Date _____