SELECT CAMPUS:

University of the Virgin Islands Access and Enrollment Services/Admissions Office

| | St. Thom | as |
|---|----------|----|
| П | St Croix | |

■ St. Croix

ENROLLMENT CONFIRMATION AND DEPOSIT FORM

We know you will make a great addition to the Buccaneer family! Confirm your enrollment at the University of the Virgin Islands by paying your \$100 (USD) enrollment deposit.

This Enrollment Confirmation and Deposit form must be returned with your Deposit Fee of \$100.00 (USD) and is required of all new students in order to facilitate planning, course scheduling, advising and registration, and new student orientation.

Please include your name and student ID number on the check or money order made payable to the "University of the Virgin Islands"; do not send cash. You can also contact the Cashier's Office at (340) 693-1437 (St. Thomas) or (340) 692-4160 (St. Croix) to pay the fee by phone. Mail/Email your completed form and/or \$100 (USD) deposit to:

Orville E. Kean Campus - Mailing Address (STT): Admissions Office ● #2 John Brewer's Bay ● St. Thomas, VI 00802-9990

Albert A. Sheen Campus - Mailing Address (STX): Admissions Office ● RR1 Box 10,000, Kingshill ● St. Croix, VI 00850-9781

Email: admissions@uvi.edu

| NAME | STUDENT ID (Provided in acceptance letter) | | |
|---|--|--|--|
| MAILING ADDRESS (PO Box or Street Number) | CITY/STATE/ZIP | | |
| PHONE NUMBER | EMAIL ADDRESS | | |
| NAME OF EMERGENCY CONTACT | RELATIONSHIP OF EMERGENCY CONTACT TO YOU | | |
| EMERGENCY CONTACT ADDRESS | EMERGENCY CONTACT PHONE NUMBER | | |
| ENROLLMENT DECISION: | STUDENT TYPE: | | |
| I plan to enroll for the: | New Freshman | | |
| | Transfer Student | | |
| ☐ Semester Year | ☐ Readmitted Student | | |
| | Rematriculated Student | | |
| | ☐ Graduate Student | | |

PLEASE READ AND SIGN I Understand That:

I am confirming my intent to enroll by making an enrollment deposit of \$100.00. If I register as expected, the deposit will be credited to the tuition charge for that semester. If I do not request a deposit refund by May 1st for the Fall semester or December 1st for the Spring semester and do not enroll as intended, the enrollment deposit will be forfeited and cannot be used to offset any other charges I may have incurred at UVI.

The Student Health form, including proof of immunization, must be completed and returned to the appropriate campus Student Health Services Office prior to registration or moving on campus.

| STUDENT SIGNATURE: | DATE: | |
|--------------------|-------|--|
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