

Daytime Telephone Number (including area code)

12 Capen Hall, Buffalo, NY 14260 | Phone: 716-645-6900 | Fax: 716-645-6411

## Not Enrolling at UB **Instructions and Form for Undergraduates**

Newly accepted freshman and transfer students who have decided not to enroll at UB should complete this form.

If you are a newly accepted student and wish to be considered for admission for a future semester, please complete the Update of Application Request form, identifying the semester of interest, to the Office of Admissions.

## **Important SUNY Policy**

When a student is registered for courses, the student assumes responsibility for paying all charges associated with those courses. A student must pay even if not one class was attended unless the courses have been dropped or resigned according to the published deadlines, which are found on the Student Accounts website.

Therefore, it is extremely important to use HUB, or in the case of accepted freshman, to contact their advisors, to drop courses before any financial penalty is assessed. (See relevant calendar on the Student Accounts website.)

name attesting to the statement below, (d) include your person number, daytime phone number and email address, (e) and date the form.			
I de	cline my acceptance of an offer of admission to UB.		
	I am an accepted freshman student who is declining my offer of admission. I understand that my courses must be cancelled by my advisor by the <u>financial penalty deadline posted on the Student Accounts website</u> .		
	I am an accepted transfer student who is declining my offer of admission. I understand that I must use HUB to drop all of my courses by the <u>financial penalty deadline posted on the Student Accounts website</u> .		
	<ul> <li>derstand that by submission of this form the following</li> <li>Dining Services</li> <li>Student Medical Insurance</li> <li>Financial Aid</li> </ul>	departments will have access to my decision not to enroll at UB	
ПОИ	ΓΕ: You must contact Campus Living at 716-645-2	171 or toll-free at 866-285-8806 to cancel your contract.	
Sele	ect the semester and include the year: Fall	Spring	
 Stud	dent Name (please print)	Student Signature	
 Pers	son Number	 Date	

Return completed and signed form:

Email address

By mail: University at Buffalo, Office of Admissions, 12 Capen Hall, Buffalo, NY 14260

By fax: 716-645-6411

By email: ub-admissions@buffalo.edu Please keep a copy for your records.