



**Early Decision Agreement Form**

Please complete and return this form by November 1, 2009. 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, 2009. Please include it with your Early Decision application, if possible. Otherwise, mail it to New York University, Undergraduate Admissions Processing Center, 665 Broadway, 11th Floor, New York, NY 10012-2339.**