



## Intent to Enroll Form

*We look forward to your enrollment at The University of Akron!*

Student Name \_\_\_\_\_

Student ID Number \_\_\_\_\_

**Yes, I Plan to Enroll at The University of Akron!** Submission of this form and the \$145 confirmation fee acknowledges my intent to enroll at The University of Akron. I understand that this fee offsets the cost associated with my participation in a mandatory New Student Orientation program and secures my seat for the upcoming semester.

Student Signature: \_\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**Send with confirmation fee to:**

The University of Akron  
Intent to Enroll  
Simmons Hall 209  
Akron, OH 44325-4716

**Confirmation fee is \$145.** Make checks payable to The University of Akron

## Welcome to The University of Akron

For questions, please contact the Office of Admissions at 1-800-655-4884, 330-972-7077 or [admissions@uakron.edu](mailto:admissions@uakron.edu).