

UPREP University Preparation

Intent to Enroll

Submit by May 18 to uprep@drexel.edu

Drexel English Language Center 229 N. 33rd Street Philadelphia, PA USA 19104 Tel:+1-215-895-2022 • Fax:+1-215-895-6775 uprep@drexel.edu •

Last/Family Name		First/Given Name	Drexel ID Number (see acceptance letter)	
	Yes, I want to enroll in the University Preparation Summer Program at Drexel ELC beginning <u>July 24, 2012</u> .			
	I have paid my \$300.00 Matriculation fee to Drexel University to confirm my acceptance to Drexel University undergraduate studies for Fall 2012.			
	Your enrollment to the University Preparation Summer program at the Drexel English Language Center must also be confirmed by payment of non-refundable \$100 tuition deposit. Please indicate how you will pay your tuition deposit:			
	☐ I will send r☐ Other:	to pay by credit card. (card details my payments by express mail.		
	——————————————————————————————————————			
	I would like to pay by credit card:			
	Amount Charged to Credit Card: \$			
	For: Tuition Deposit			
	Type of Card: Visa Mastercard American Express Discover Card			
	Cardholder's Name (as it appears on the card):			
	Cardholder's Si	gnature:		
	Account Numb	er:	Expiration:	
Student	t signature		Date	
Print N	lame)		_	
ou ca	n send this form b	y fax to +1-215-895-6775. You can als	o scan and email it to uprep@drexel.edu.	

EM contacted

For office use only SAAADMS Confirmation