

Intent to Enroll

Once your Intent-to-Enroll form has been received and processed by the Admissions Office you will be allowed to register for classes during one of our advising and registration sessions.



UNIVERSITY of HAWAII*
HILO

Intent to Enroll Form

Student ID Number: _____ (Your ID is printed on your acceptance letter)

Name _____
Last _____ First _____ MI _____

Address (Street Number or P.O. Box) _____

City _____ State _____ Postal/Zip Code _____

YES! I accept your offer of admission and will enroll for the Fall Spring Semester

No. I will not enroll at this time.

GENERAL UNDECLARED MAJORS ONLY (Indicate an area of interest below):

Agriculture Hawaiian Studies Social Sciences Education

Business Administration Humanities Natural Sciences No area of interest yet

Signature _____ Date _____

By entering your full name above you agree that it is the same as your signature

Intent to Enroll Fee Form: You do not need to pay the \$60 non-refundable tuition deposit at this time if you are applying for financial aid. Please indicate your financial aid status or method of payment below. If you are paying the fee you can do so by check or money order drawn from a U.S. Bank or by credit card.

OFFICE USE ONLY:

Please fill in the appropriate information below:

Choose I am applying for Financial Aid and I intend to enroll at UH Hilo (if yes check box and submit form)

One I am submitting my \$60 payment. (if yes check box and indicate payment type below)

If submitting payment, indicate method of payment below:

Choose Money Order or Check (attach check or money order drawn from a US Bank and submit form)

One Credit Card (complete credit card information below and submit form)

Credit Card Information (complete if paying by credit card):

Cardholder Name: _____ Phone: _____

Address (Street Number or P.O. Box) _____

City _____ State _____ Postal/Zip Code _____

Master Card

Visa Card Number _____ CVV2 _____ Expiration Date _____

Agreement: I agree to pay \$60.00 (U.S.) according to the card issuer agreement. By signing the payment authorization form, I acknowledge that the fee is non-refundable and non-transferable.

Card Holder Signature _____ Date _____

You may fax the form to: UH Hilo Admissions Office at 1-808-932-7459 or mail the original to: UH Hilo Admissions Office, 200 West Kawili Street, Hilo,, Hawai'i 96720. Cash payments can only be made by visiting the Business Office on campus.