



**INTENT TO ENROLL**

June 27, 2016

SMU ID: # \_\_\_\_\_

Name/ Address:

E-mail address:

(w)  
(c)

Fall 2016

Dallas Campus

Please check one of the boxes below indicating your plans for the upcoming term.  
Return this form within three weeks of your admittance to ensure a placement in the  
entering class.

- ☐ I accept my admission to Perkins School of Theology for the Fall term 2016
- ☐ I would like to postpone my admission to Perkins for the (circle one)  
spring term 2017/ fall 2017
- ☐ I plan to accept admission at another seminary or school of theology. *If checked,  
please indicate which one:* \_\_\_\_\_
- ☐ I do not accept my admission for other reasons. *If checked, please specify the  
reason(s):*  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

To ensure that our records are accurate, please provide any change of information by  
making the correction on this form.

\_\_\_\_\_  
*Student Signature*

\_\_\_\_\_  
*Date*