



INTENT TO ENROLL

June 23, 2017

SMU ID: # _____

Name/ Address:

E-mail address:

(w)
(c)

Fall 2017

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 2017
- ☐ I would like to postpone my admission to Perkins for the (circle one)
spring term 2018/ fall 2018
- ☐ 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