

Full name

Signature \_\_\_\_

## **Early Decision Agreement**

Before completing this form, please consult the instructions for early decision applicants on our website: www.usfca.edu/admission/undergraduate/early-decision-early-action-regular-decision. The early decision agreement is required only for candidates who have chosen to apply via the binding early decision plan to the University of San Francisco as their first-choice institution. College Name: University of San Francisco Deadline \_\_\_ Early Decision 1 Early Decision 2 mm/dd/yyyy Have you applied to the University of San Francisco in any previous year? **Student Section** Legal Name First/Given Last/Family/Sur (Enter name exactly as it appears on official documents.) Suffix Date of Birth \_\_\_ Email \_\_\_ mm/dd/yyyy Address Number and Street Apartment Number City/Town State/Province Country ZIP/Postal Code County Current Secondary/High School \_\_ Instructions If you are admitted under an early decision plan, you must promptly withdraw applications submitted to other colleges and universities and make no additional applications to any other university in any country. If you have applied for financial aid, you need not withdraw other applications until receiving your financial aid offer from the University of San Francisco. **Student Signature** I wish to be considered as an early decision candidate at the University of San Francisco. I have read and understand my rights and responsibilities under the early decision process. I also understand that with an early decision offer of admissions, this institution may share my name and my early commitment with other institutions. Signature **Counselor Signature** As the counselor, I have advised the student to abide by the early decision commitment outlined above. Full name Signature \_\_\_\_\_ mm/dd/yyyy **Parent/Legal Guardian Signature** As the parent/legal quardian, I will ensure the student abides by the early decision commitment outlined above.

Please send this form directly to the University of San Francisco Application Services at appservices@usfca.edu.

Date

mm/dd/yyyy