

## **Admission Cancellation Notice**

If you decide not to attend Indiana University, please use this form to notify us of your decision. By completing it, you are indicating that you would like the Office of Admissions to cancel your admission. We wish you the very best of luck!

Name			
Address			
Phone			
Date of Birth (mm/dd/yyyy)			
Signature (required)			
In order to help us provide the best service to students duri please indicate below the reasons why you will not be atten			•
Check all that apply:  Financial reasons prevent my attendance IU did not provide a scholarship to me Health reasons prevent my attendance IU does not offer my chosen major Academic reputation was better elsewhere Size of school Wanted to be closer to home Wanted to be farther from home Location was a problem I will be serving in the military Personal reasons prevent my attendance			
Are you planning to attend another university/college?	yes	no	(circle one)
If so, which one?			
Comments:			
Please mail form to the following address to ensure your a Office of Admissions, 940 E. Seventh Street, Bloomington, II		is cance	elled: