

STATEMENT OF COMMITMENT

Request for Admissions Consideration

To: Admissions Services, A-209 ASB, 422-2537, fax 422-0623

From (Please Print): _____

Phone: _____

Student Name (Please Print): _____

BYU ID Number: _____

Desired Entry Date (Year and Semester/Term):

Semester

Year

Level of Financial Support:

- Half Tuition or greater
 Less than half tuition - special admission consideration requested.

1. In the space provided or in an attached letter, please articulate what contributions this applicant can potentially lend to the campus environment by means of talent, creativity, and/or in fostering an enriched environment:

2. In the space provided or in an attached letter, please articulate how your department will lend support to this applicant to ensure academic success (study hall sessions, individual tutoring, faculty mentoring, mandatory advisement, etc.):

(Signature of Department Chair/Program Director/Coach)

(Date)

(Signature of Dean/Athletic Director)