

Not Enrolling at UB Instructions and Form for Undergraduates

Newly accepted freshman and transfer students who have decided not to enroll at UB should complete this form.

If you are a newly accepted student and wish to be considered for admission for a future semester, please complete the [Update of Application Request \(PDF\)](#), identifying the semester of interest, to the Office of Admissions.

Important SUNY Policy

When a student is registered for courses, the student assumes responsibility for paying all charges associated with those courses. A student must pay even if not one class was attended unless the courses have been dropped or resigned according to the published deadlines, which are found on the Student Accounts website.

Therefore, it is extremely important to use HUB, or in the case of accepted freshman, to contact their advisors, to drop courses before any financial penalty is assessed. ([See relevant calendar on the Student Accounts website.](#))

Please take care to (a) check the appropriate box below, (b) enter the relevant semester, (c) print and sign your name attesting to the statement below, (d) include your person number, daytime phone number and email address, (e) and date the form.

I decline my acceptance of an offer of admission to UB.

- I am an accepted freshman student who is declining my offer of admission. I understand that my courses must be cancelled by my advisor by the [financial penalty deadline posted on the Student Accounts website](#).
- I am an accepted transfer student who is declining my offer of admission. I understand that I must use HUB to drop all of my courses by the [financial penalty deadline posted on the Student Accounts website](#).

I understand that by submission of this form the following departments will have access to my decision not to enroll at UB:

- Dining Services
- Student Medical Insurance
- Financial Aid

NOTE: You must contact Campus Living at 716-645-2171 or toll-free at 866-285-8806 to cancel your contract.

Select the semester and include the year: Fall _____ Spring _____

Student Name (please print)

Student Signature

Person Number

Date

Daytime Telephone Number (including area code)

Email address

Return completed and signed form:

By mail: University at Buffalo, Office of Admissions, 12 Capen Hall, Buffalo, NY 14260

By fax: 716-645-6411

By email: ub-admissions@buffalo.edu

Please keep a copy for your records.