



EARLY DECISION CANDIDATE AGREEMENT

DUE NOVEMBER 1

LAST/FAMILY/SURNAME	FIRST/GIVEN	MIDDLE (SPELL OUT)	(JR., ETC.)
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U.S. SOCIAL SECURITY NUMBER

We welcome you as an Early Decision applicant, and ask that you please read and sign with your parent(s) and counselor this Early Decision Candidate Agreement. At Hanover College, we take this commitment seriously and expect that you will also. This form should be completed and returned to the Office of Admission as soon as possible. Your application for admission under the Early Decision plan will not be complete without this form.

By signing this document you acknowledge and agree with the following statement. All signatures are required.

Hanover College is my first-choice college, and thus I am applying under the Early Decision option. If accepted, I will attend Hanover (assuming an appropriate financial aid package) and withdraw all applications for admission pending elsewhere.

STUDENT SIGNATURE	DATE
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PARENT SIGNATURE	DATE
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GUIDANCE COUNSELOR SIGNATURE	DATE
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Office of Admission
517 Ball Drive
Hanover, Indiana 47243
hanover.edu