

Salem State University  
Enrollment Management  
352 Lafayette Street  
Salem, MA 01970

**PURPOSE**

The purpose of this form is to apply for deferment of the enrollment deposit. Students who have been granted on-campus housing must pay the applicable housing deposit. Requests to defer the enrollment deposit will be evaluated on a case-by-case basis.

Deferments will only be considered for economic hardships and a Free Application for Federal Student Aid (FAFSA) must be on file.

Student name \_\_\_\_\_  
(Last) (First) (Middle)

Salem State University Student ID \_\_\_\_\_

Semester admitted:  Fall  Spring Year \_\_\_\_\_

Home address (# and street) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Telephone \_\_\_\_\_

Email \_\_\_\_\_

Please explain your circumstances that make a deferment of the enrollment deposit necessary.

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Signature \_\_\_\_\_ Date \_\_\_\_\_

You will be notified by email within one week of receipt of this letter whether or not your request has been approved.

**INTERNAL USE ONLY**

Approved  Not approved

Date \_\_\_\_\_