

# MIT Graduate Admissions Reply Form

## HOW TO SUBMIT YOUR REPLY FORM

Please complete this form whether or not you plan to attend MIT. Submit your completed form directly to the graduate department that has admitted you. You may submit this form by mail, drop it off in person at the graduate department's office, or contact the department for other options such as email. Contact information for all departments can be found at <http://gradadmissions.mit.edu/programs>. Please include **77 Massachusetts Ave. Cambridge, MA 02139** with the department's name and room number when replying by mail.

PLEASE PRINT NAME

\_\_\_\_\_  
Last (Family) First (Given) Middle

\_\_\_\_\_  
Date of Birth (month/day/year)  Male  Female MIT ID

\_\_\_\_\_  
Country of Citizenship E-mail

Summer Mailing Address

Permanent Mailing Address (if different)

\_\_\_\_\_  
Street

\_\_\_\_\_  
Street

\_\_\_\_\_  
Street (continued)

\_\_\_\_\_  
Street (continued)

\_\_\_\_\_  
City

\_\_\_\_\_  
City

\_\_\_\_\_  
State or Province

\_\_\_\_\_  
State or Province

\_\_\_\_\_  
ZIP or Postal Code

\_\_\_\_\_  
ZIP or Postal Code

\_\_\_\_\_  
Country

\_\_\_\_\_  
Country

\_\_\_\_\_  
Telephone

\_\_\_\_\_  
Telephone

**Yes, I plan to attend MIT.** I plan to enroll for the term beginning:  Summer 2019  Fall 2019  Spring 2020

in the department of: \_\_\_\_\_

for the degree of: \_\_\_\_\_

OR

I would like to defer my enrollment in MIT's department of: \_\_\_\_\_

until the term beginning: \_\_\_\_\_ (Please check with your department regarding deferment policy.)

**No, I do NOT plan to attend MIT.** I plan to enroll at another university.

Name of University: \_\_\_\_\_

in the department of: \_\_\_\_\_

OR

I plan to work at: \_\_\_\_\_  
company name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Thank you and best wishes for a successful graduate career!