

STATEMENT OF DECISION

Date _____

I hereby _____ (accept or decline) my **conditional appointment** as a cadet of the Virginia Military Institute in the Class of 2025. **I understand that this appointment may be withdrawn if I fail to maintain a satisfactory academic and conduct record, if I become medically disqualified, or if it is discovered that any of the information included on my application at the time of submission or subsequent to submission is false or has been concealed.**

I have paid my Deposit of \$300 electronically _____
My Deposit of \$300 is enclosed _____

I have read the terms of my Offer of Appointment and understand that this deposit is refundable until **01 May 2021**, but not thereafter.

All official VMI correspondence, which is sent via United States mail services, will be sent to the cadet's permanent resident address.

_____ Student	_____ Primary Parent(s)	_____ 2 ND Parent (if divorced or separated)	_____ Other (list relationship to student below)
_____ Address	_____ Address	_____ Address	_____ Address
_____ City, State, Zip	_____ City, State, Zip	_____ City, State, Zip	_____ City, State, Zip
			Relationship _____ Telephone _____ (Please indicate Home or Cell)

PLEASE BE SURE TO ANSWER THE FOLLOWING QUESTIONS:

Marital Status _____ (VMI policy states that cadets must be unmarried)

Are you currently a Reserve or National Guard participant? **YES** **NO** If yes, do you intend to drill with your unit while at VMI? **YES** **NO**
If yes, what is the location of the reserve/guard unit? _____

Signature of Appointee

Signature of parent or guardian

Appointee Name (please print)

Parent or Guardian Name (please print)