



ADMISSIONS DEFERMENT APPLICATION

Section A: Student Information

Student Name _____ SSN _____
 Student ID _____ Date of Birth _____
 E-Mail _____ Student's Phone _____

Section B: Deferment Request

Original Admit Term _____	Requested Return Term _____
Original Major _____	Requested Major _____

Section C: Information Request

You will be Required to Submit Official Transcripts from any Institution you have Attended after Applying to UAFS. Please List Any Colleges Attended Since Your Original Admission to UAFS, Along with Dates of Attendance and the Number of Hours Completed at Each Institution.

- _____
- _____
- _____
- _____

Section D: Agreement

You, the student, are eligible to defer your application for up to one (1) year. If you wish to attend after a year has passed you will need to reapply to the university. Your initial admissions decision is subject to change based on any updated coursework information and any official updated transcripts. This form must be delivered to the UAFS Office of Admission at least one (1) business day prior to the first day of classes for the semester you wish to defer to. Your form will be processed 24-48 hours after all required documentation has been received.

Signature _____ Date _____