



GRADUATE ADMISSIONS DEFERRAL FORM

Offers of admissions are made only for the semester for which the student has applied. Students who do not enroll during the semester for which admissions is granted will forfeit their admission, unless they email to graduate.admissions@lehman.cuny.edu the completed Deferral Request form along with the Commitment Deposit form no later than the day before classes begin of the original semester of admissions. A deferral is limited to one calendar year. After one year's deferral period the student must reapply. Final approval for the requested deferral is made by the program advisor of the program of which the student originally applied.

Last Name First Name Middle

Previous Name Name on Supporting Documents, if Different

Date of Birth Last 4 Digits of SS# EMPL ID

Permanent Address Apartment City State Zip Code Country

Mailing Address Apartment City State Zip Code Country

Email Address Mobile Telephone Permanent Telephone Home Telephone

Program to which accepted:

Requesting deferral until (choose one): fall [] spring [] 20____ (enter year)

Reason(s) for request:

Three horizontal lines for writing reasons for request.

Student Signature Date

Request Approved [] Request Denied [] Program Advisor Signature Date

