



Request to Defer or Withdraw Graduation Application

I, _____ acknowledge that I am
Print Name

requesting to [] **Defer** or [] **Withdraw** my application for graduation in

_____.
Semester/Year

I understand that I must reapply for graduation for this program by submitting a new graduation application by the published deadline. I am also aware that late fees will apply and I will not be allowed to participate in the graduation ceremony or activities should I choose to apply after the final published deadline for that semester.

My signature acknowledges that I have read and agree to the terms prescribed in the statements above.

Student ID#

Date

Student Signature

Registrar's Office