

This section to be completed by the student

Name \_\_\_\_\_

Banner ID #: \_\_\_\_\_ U.S. Citizen or Permanent Resident: Yes No

Address: \_\_\_\_\_

\_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code

Home Telephone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Reason for deferral: \_\_\_\_\_

Please indicate the School/Program to which you seek deferred admission:

Term you were admitted to: \_\_\_\_\_

Term you wish to defer to/term you expect to return and enroll in courses (can only defer to Summer if your program admits for that term or offers courses during the Summer term : \_\_\_\_\_

University policy states that admitted students have one year to enroll in courses before admission status expires. The School of Graduate Studies will notify the student of this time limitation. **If you have already been registered for classes, please make sure your department drops you from all courses before add and drop ends.**

Digital Signature: \_\_\_\_\_

**This section to be completed by the Department**

Please indicate below the type of financial support the student was offered from your department:

None

Graduate Assistantship/Amount: \$ \_\_\_\_\_ per semester

In-State Tuition Award/Amount: \$ \_\_\_\_\_ per semester

Out-of-State Tuition Remission: \$ \_\_\_\_\_ per semester

Other: \_\_\_\_\_ Amount: \$ \_\_\_\_\_ per semester

**If financial assistance was offered, please indicate whether this assistance will be available if admission is deferred until the term specified above.**

Yes, the same financial arrangements are available

Assistance is available, but the terms will be revised upon the student's enrollment

No, the financial arrangement offered is no longer valid.

Digital Signature: \_\_\_\_\_  
(Dean or Department Chair)

**Form should be completed and returned to the School of Graduate Studies at gradadmissions@nccu.edu.**