Application to Defer Graduation

CUNYfirst EMPL ID (8digits): ____________________________

Graduation Term Applied for: Summer Fall Winter Spring 20____ (circle one term and write in the year)

Name: ____________________________________________

Last First Middle

Phone: ____________________________________________

*Cell Home (if applicable) Work (if applicable)

York College Email: __________________________________

Reason for requesting deferral:

________________________________________________________________________________

________________________________________________________________________________

________________________________________________________________________________

________________________________________________________________________________

Defer Graduation Application to: Summer Fall Winter Spring 20____ (circle one term and write in the year)

Student Signature ___________________________ Date ____________

OFFICE USE ONLY

Completed by ___________________________ Date ____________

EGT Updated on Program/Plan in CUNYfirst