

Application for Deferment Form - International Undergraduate Applicant

If you would like to request to defer your application to the semester after the one you have already applied to, please fill out this form and e-mail it to DeferUGAdmissions@asu.edu. Please indicate *international Deferral Request* in the subject line of your email.

Name: _____

ASU ID#: _____ Date of Birth: _____
Day/Month/Year

Reason for Deferral Request: _____

I will be attending another institution during the semester I am deferring. Deferral is not for purposes of attending another university. If attending another university, you will need to reapply for a future term.

Yes No

If Yes: Institution Name: _____

City: _____ State: _____ Country _____

Before attending ASU, I will be in the United States under a Visa: Yes No

If Yes: What type of Visa: _____

Acknowledge by checking the boxes below:

- I understand that my request may not be processed if it is made less than two weeks before the start of my current semester.
- I understand that my request may not be processed if my English Proficiency scores will be over 2 years old by start date of deferral term.
- I understand that any coursework completed between my admission and the semester I am attending could affect my status and may be cause for denial from Arizona State University.
- I understand that if I do not enroll in the semester I am deferring to, I will have to reapply
- I understand that the full amount of my enrollment deposit will be placed on my student account to pay at the time of arrival. I agree to pay the full amount of this enrollment deposit. I understand that if I choose not to come to Arizona State University, I am still responsible for payment of this amount.

Signature or full name _____ Date _____

When completed, please make a copy of this form for your own records and email the original to: DeferUGAdmissions@asu.edu. Please indicate *international Deferral Request* in the subject line of your email.