



OFFICE OF ENROLLMENT SERVICES, HH10

800 W Campbell Road Richardson, TX 75080-3021

(972) 883-2270 FAX (972) 883-6803

PETITION FOR GRADUATE DEFERMENT OF ADMISSION

Applicants should complete this form and submit it to the Office of Enrollment Services in Hoblitzelle Hall for consideration by the Academic Programs. A statement of reason and any supporting materials the applicant believes to be relevant and wants the Academic Program to consider should be submitted with this form.

PLEASE PRINT

*NAME _____
Last/Family Name First MI

*NAME ON ORIGINAL APPLICATION: _____
(If different from current name) Last/Family Name First MI

UTD ID NUMBER or SOCIAL SECURITY #: _____

PROGRAM/MAJOR: _____ SEMESTER/YEAR ADMITTED _____

INTENDED SEMESTER/YEAR OF DEFERRAL: _____

ADDRESS: _____ PHONE: _____

CITY: _____ STATE: _____ ZIP CODE: _____

COUNTRY: _____

HOW LONG AT THIS ADDRESS: _____ Email address: _____

If less than 12 months, provide previous address: _____

COLLEGES ATTENDED SINCE LAST APPLICATION TO UT Dallas: (Updated official transcripts required to process deferment)

Institution	City/State	From	To

Are you currently enrolled at another college or university? _____ Yes _____ No

If so, provide the name of the school: _____

Are you a Texas Resident? _____ Yes _____ No

Current Employment: _____
Employer City/State Dates: From To

Do you currently hold a Visa? ___ Yes ___ No If Yes, Visa type and expiration date: _____

All Visa holders should contact the International Student Services Office at 972-883-4189 for updated information.

DEPARTMENTAL USE ONLY

Semester/year of admission: _____ Semester/year of deferment: _____

School: _____ Departmental approval signature: _____ Date: _____

MAXIMUM DEFERMENT IS 12 MONTHS AFTER WHICH A STUDENT MUST REAPPLY

APPLICANT SIGNATURE: _____ DATE: _____

Social Security Statement: Your Social Security Number (SSN) or UTD Identification Number (UTD ID) is being requested because it is a unique ID which is maintained for the purpose of accuracy in tracking information. The disclosure of such information is voluntary. Disclosure of your SSN or UTD ID is governed by the Public Information Act (Chapter 552 of the Texas Government Code).

With few exceptions, you are entitled at your request to be informed about the information UTD collects about you. Under Sections 552.021 & 522.023 of the TX Govt. Code, you are entitled to receive and review the information. Under Section 559.004 of the TX Govt. Code, you are entitled to have UTD correct information about you that is held by us and that is incorrect.