Postpone Graduation Request

- Part A of this form should be completed once the student knows that the graduation year will be delayed.
- Once part A is approved:
  - Students should discuss all plans for leaves of absence or enrolling in additional courses with their academic counselor who will guide them through the needed/ or required steps.
  - A copy of the form should be submitted to the Office of the Registrar. The student’s class mailing list subscription will be changed according to the new graduation year.

Student LAST Name: ___________________________ Student FIRST Name: ______________________________
Student ID#: __________________________________Student current Class: ______________________________

**Part A**

I would like to request to postpone my graduation from year........to year ........ for the below reason:

☐ Personal LOA  ☐ Medical LOA  ☐ Academic LOA  ☐ Additional, repeating or reduced course(s)

From Date: ___________________________ until Date: ___________________________

Faculty Advisor: ___________________________ Date______________________________

Assoc. Dean for Premedical Education/Designee Approval: _____________________ Date________________

**Part B**

The student met with me and submitted the below:

☐ Request for LOA  ☐ Schedule of courses

Academic Counselor: ___________________________ Date______________________________

Assis Dean for Student Affairs/Designee Approval: __________________________ Date________________

Additional Comments: __________________________________________________________________________
_____________________________________________________________________________
_____________________________________________________________________________

I will follow up to submit all the required documents pertaining to my plan.

Student’s Signature: ___________________________ Date______________________________