



## Request for Deferral of Admission Form

Please print legibly or type: Return completed form to the SON Office of Admissions and Recruitment.

First Name \_\_\_\_\_ Middle Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Program: \_\_\_\_\_

Primary Phone #: \_\_\_\_\_ Term of Admission (Example: Fall 2020): \_\_\_\_\_

E-mail Address: \_\_\_\_\_

**\*With approval from the School of Nursing - Office of Admissions and Recruitment, recently admitted Graduate students have the ability to defer their offer of admission to the next admission cycle for their program. Students may only defer their admission once.**

Student Signature: \_\_\_\_\_ Date \_\_\_\_\_

Please submit signed form to School of Nursing - Office of Admissions and Recruitment  
65 Bergen Street ▪ Room 601 ▪ Newark, NJ 07107  
Phone: 973-972-3067 ▪ Fax: 973-972-2743  
snadmissions@sn.rutgers.edu

ADMISSIONS USE ONLY

The above-named student has paid their tuition deposit.

Signature \_\_\_\_\_ Date \_\_\_\_\_  
Associate Director for Admissions and Recruitment