

DEFERRAL - GRADUATE STUDENT DATA FORM

Complete this form and mail, fax, or email to:
The Evergreen State College
Graduate Admissions
Evans 1200
Evergreen Parkway NW

Olympia WA 98505
graduateadmissions@evergreen.edu | Fay: 360-867-6794 | Phone: 360-867-6864

graduateadiffissions@evergreen.edu Fax: 360-867-6794 Phone: 360-867-6856
Legal Name: Now Porror Defer to Fall 2024
Mailing Address: 702 PINE AVE NE Check One: MES MIT MPA Check One: MES MIT MPA WA 76506
Telephone: (306) 286-6480 Alternate/Business Telephone: ()
Email Address Will first 840 MMil. 11 M Baccalaureate Degree earned/expected from Mame of Institution Name of Institution Date Conferred
Will you attend a college or university prior to entering the graduate program?
No YesName of College or Institution
List all courses you are taking or plan to take between now and entering the graduate program.
1
2.
3
4
In signing this form, I acknowledge that failure to disclose and submit official transcripts from all schools, colleges, or universities attended and failure to disclose and submit complete and accurate information may result in dismissal from said institution. This includes submission of official transcripts upon completion of all academic work planned, or currently in progress. I understand that my deferral is incomplete without my signature below. Signature of Student Date