

DEFERRAL - GRADUATE STUDENT DATA FORM

Complete this form and mail, fax, or email to:
The Evergreen State College
Graduate Admissions
Library 2002
Evergreen Parkway NW
Olympia WA 98505

graduateadmissions@evergreen.edu | Fax: 360-867-6794 | Phone: 360-867-6856

Legal Name: Sil	ne SUN	Defer to Fall 2022 Check One: ✓ MES	□ MIT □ MPA
Mailing Addres	s: 1520 Lakemoor	Loop SW	
	98512 Olympia V	WA	
Telephone: (360	352-1986	Alternate/Business Telephone:()	
Email Address	sihesun99@163.	com	
		pected from University of Montpellier (France) Name of Institution	July 2022 Date Conferred
Will you attend	a college or unive	ersity prior to entering the graduate program?	
□ No	√ Yes	University of Montpellier (France) Name of College or Institution	
List all courses	you are taking or	plan to take between now and entering the gra	duate program.
1. Internship of Plant Biology			
2. Development of Plants			
3. Vegetal Autotrophy			
4. To be	determined		

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.