



Graduate Admissions
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Radford, VA 24142
(540) 831-5005
(540) 831-5431 fax
gradadmit@radford.edu

**Graduate Admissions
Application to Defer or Change Enrollment Term**

Name _____ RU Student ID _____

RU Email _____

Applying to which program _____

Have you received admission? Yes ___ No ___

Current Term Fall ___ Summer ___ Spring ___ Year _____

Term Change Fall ___ Summer ___ Spring ___ Year _____

If summer, please specify Maymester, Summer I, Summer II, Summer III, Augustmester

I understand that by requesting the term change that my application will be reviewed for the requested term and be considered new for admissions consideration.

Student Signature

Date

Graduate Program Approver

Date

Graduate Admissions Approver

Date