

Decision:

## **Request to Defer Admission**

I have decided Wentworth Institute of Technology is the school for me, but now is not the time. Therefore, please accept this deferral application so I may be a member of Wentworth's incoming class for a future term.

Name:		W-ID Number:	
Date of I	Birth:		
Address	:		
E-mail: (E-mail you	u will have access to over the next y	Phone:	
I wish to defer from to *Students may defer up to one academic year			
I wish to defer my admission to Wentworth for the following reason:			
	•		
In order to defer to a subsequent semester, I qualify for, and understand, the following criteria:			
<ul> <li>I must submit a non-refundable \$250.00 deposit in order to hold my spot.</li> </ul>			
0	<ul> <li>If I do not enroll at Wentworth within one academic year, I must reapply for admission in the future.</li> </ul>		
0	o I will not attend another college or university during the academic year for which I have deferred. Any courses I take without prior approval from Wentworth may not be eligible for transfer credit.		
0	<ul> <li>Any merit scholarship I have received will not carry over to next Fall. Instead I will be reconsidered for merit scholarships during my new enrollment cycle.</li> </ul>		
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Applicant Signature:		Date:	
Completed forms can be emailed to (admissions@wit.edu) or mail to the address below no later than two weeks prior to the start of the fall semester.			
Wentworth Institute of Technology			
Admissions Office			
550 Huntington Avenue			
Boston, MA 02115			
For Admissions Use only:			

Date:

Counselor: