



**SNOW  
COLLEGE**

### REGISTRATION TYPE:

- ☐ Fall Priority: Early April  
☐ Spring Priority: Early Nov.  
☐ Summer Priority: Late

## Request for College Deferment or Leave of Absence

A college deferment will hold your scholarship and housing costs until you return. Acceptable reasons to defer your scholarship or to receive a leave of absence include, but are not limited to; Military or church service. Requests must be approved by the appropriate committee. For medical deferment please contact our ADA office at 435-283-7321.

This form allows you to return without reapplying or paying the \$15 readmit fee. You must notify the Admissions Office of any permanent address change during your absence. Scholarship deferments and/or leaves of absence may be granted for a maximum of five semesters.

### RETURN FORM TO:

Snow College Admissions, 150 College Avenue, Ephraim, UT 84627  
Fax: 435.283.7157 or Email: [lorie.parry@snow.edu](mailto:lorie.parry@snow.edu)

### STUDENT INFORMATION

Student Name: \_\_\_\_\_

Badger ID #: \_\_\_\_\_

Email: \_\_\_\_\_ Cellphone: \_\_\_\_\_

Permanent Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zipcode: \_\_\_\_\_

Advisor's Name: \_\_\_\_\_

### DEFERMENT REQUEST

**Reason(s) for your request:** \_\_\_\_\_

Check all that apply:

☐ **Defer Scholarship**

Semester you plan to return/attend Snow: ☐ Spring ☐ Summer ☐ Fall 20\_\_\_\_

Scholarship(s) being deferred: \_\_\_\_\_

☐ **Leave of Absence**

Semester you plan to LEAVE Snow: ☐ Spring ☐ Summer ☐ Fall 20\_\_\_\_

Semester you plan to RETURN to Snow: ☐ Spring ☐ Summer ☐ Fall 20\_\_\_\_

☐ **Defer Housing Cost**

Semester you plan to return/attend Snow: ☐ Spring ☐ Summer ☐ Fall 20\_\_\_\_

Housing Contract you are currently enrolled/interested in:

☐ Fall only ☐ Academic Year ☐ Spring only

☐ **Release of Information**

If you give permission to another person(s) to transact business at Snow for you, please list the names below:

Name of Person: \_\_\_\_\_ Relationship of Person: \_\_\_\_\_

Person's Email: \_\_\_\_\_

*The Family Educational Rights and Privacy Act (FERPA) restricts information from being released or another person conducting business for a student. You may consider giving authorization to transact business for you during your absence. This will allow someone else to assist you with registering for classes, review statements, etc.*

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