

Texas Woman's University  
The Graduate School

Doc Type: _____ SACP _____
Description: _____ / _____
For Office Use Only

**Request Change of Start Term**

*Note: This form is to be used by students who have already been accepted to TWU and wish to change/defer their start term. Students may request **one** deferral, after which they must reapply.*

Student ID	Last Name	First Name	Middle Initial

Are you an F1 visa holder? \*

*\*F1 visa holders can only begin classes in Fall or Spring semesters.*

Do you need a new letter issued for scholarship or I-20 purposes?

If yes, please provide the address where the letter should be sent:

**Original Start Term**

**New Start Term**

**INSTRUCTIONS:** Student should fill out the Student ID, Name, and Reason for Change fields, then electronically sign and forward via email to the department.

The department approver will then electronically sign the form and forward to the Graduate School.

The Graduate School will electronically sign the form and forward to the Office of Admissions Processing so that the term can be changed and, if applicable, a new letter of admission will be issued

Any disclosure of information will be governed by the FERPA act.

**Reason for Change**

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

\_\_\_\_\_  
Department Approver Signature Date

\_\_\_\_\_  
Graduate School Signature Date

\_\_\_\_\_  
Processed by OAP Date