

Simmons College GSLIS

Future Plans Form

If you will not be enrolling next semester, please complete this form and return it to GSLIS Admissions, Simmons College, 300 The Fenway, Boston, MA 02215.

Name: _____

ID # _____

Address: _____

Advisor: _____ Number of courses completed (4 sem. hrs. = 1 course)
(2 sem. hrs. = 1/2 course): _____

New students You may defer your entry date for up to one year from the semester for which you were admitted.

Returning students If you are unsure of when you wish to return, please call 617-521-2800 when your plans are set so that we can get registration materials to you well in advance to ensure your class priority status.

Deferral

Please mail me registration materials for:

FALL _____ SUMMER _____ SPRING _____
year year year

_____ I have registered for the coming semester. Please cancel my registration.
(Contact Student Accounts at 617-521-2009 for refund.)

Permanent Withdrawal

Reason _____ Please withdraw me from the program.

_____ signature

_____ date