SUNY Polytechnic Institute Registrar's Office Veteran's Deferral Request

100 Seymour Road, Utica, New York 13502

☐ Fall Semes	ter 🔲 Spring Semester 🚨 S	ummer Semester 20 Chapter #	
NAME:		SUNY Poly ID #:	
(1) Monthly VA Benefits \$ T I M E S X		(2) Amount Due on Semester Bill \$	
# of full months in semester		Total Semester Aid \$	
Maximum Defe Allowed	rral \$	Balance \$	
Signature/Date of	Veteran's Official:		
	//	-	
(2) STUDENT CERT semester unles payments may college policy, y	will be made during month of _ IFICATION: I understand that s the amount deferred is paid result in the cancelation of cu your academic records will re	, unless outstanding balance is less than this and the second of the sec	bsequent <u>lly</u> with
	SIGNATURE OF STUDENT	DATE	
	AL APPROVED AL DISAPPROVED	(REASON)	
SIGNA	TURE OF BUSINESS OFFICER	DATE	

White: Business Office; Yellow: Student; Pink: VA Certifying Official