European University of Lefke
Cyprus Science Foundation

Office of International Admissions

Deferral of Admission Request Form

Candidate's Name & Surname:	
Department applied for:	
Academic Year & Semester applied for previously:	
Full reference number of previous Admission Letter:	
Reasons for not being able to attend the Semester admitted for:	
Candidate's new Intake preference:	
Candidate's email address:	
Candidate's Telephone number:	
Candidate's signature	
Date:	

EUROPEAN UNIVERSITY OF LEFKE

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