

4610 X Street, Sacramento CA 95817/Phone: (916) 734-1838 / Fax: (916) 734-2178

**Student Name:** \_\_\_\_\_ **ID:** \_\_\_\_\_ **Track:** \_\_\_\_\_

Students requesting a deferral of the USMLE Step 1 must get approval from the Office of Medical Education (OME) and the Committee on Student Promotions (CSP). Students who are approved for a deferral, are required to be enrolled in Directed Study for Spring Quarter 2025. Directed studies enrollment will require weekly meetings with OSLEP and participation in a May 2025 CBSE exam. Please carefully review the CSP [USMLE Step 1 Deferral Policy](#) before completing this form.

Students should complete this form in its entirety and submit as directed below. Please remember that deferrals are based on academic reasons. Please specify why you think you would benefit from this deferral (attach an additional form if necessary):

Step 1 Deferral Form

**Signatures below constitute acknowledgement of deferral plans but not necessarily agreement.**

Signature of OSLEP Staff & Date: \_\_\_\_\_

Signature of Clinical Curriculum Manager & Date: \_\_\_\_\_

Signature of Academic Coach & Date: \_\_\_\_\_

*I verify that I have met and discussed the implications of my requested deferral with the above staff and faculty. I understand that if a deferral is granted, I will be required to participate in Directed Studies Spring Quarter 2025, including participation in a May 2025 CBSE exam.*

**Student Signature & Date:** \_\_\_\_\_

**Student to email completed form to the Committee on Student Promotions staff ([HS-SOMCSP@ucdavis.edu](mailto:HS-SOMCSP@ucdavis.edu))**

<b>CC:</b>	
Student	SADME/ADSA
Registrar / Student Records	CSP Staff
Financial Aid	Curriculum Manager