REQUEST FOR PART-TIME STATUS DAY DIVISION (XRG)

WESTFIELD STATE UNIVERSITY OFFICE OF THE REGISTRAR

FALL	□ SPRING	Year:	
STUDENT NAME:			CWID: A
Day Division students who must reduce their status to part-time (less than 12 credits in a given semester) may apply to do so by submitting this form. If approved, your tuition and fees will be calculated at the part-time rate.			
I am requesting this status for the fol	lowing reason: (ch	eck one)	
I am a graduating senior in my final semester.			
I am participating in the Disney internship program.			
Personal circumstances ma	ke it necessary for	me to atte	nd school part-time Please explain:
STUDENT SIGNATURE			DATE
Part-time status may be granted for one (1) Return to full-time status;(2) Transfer the matriculation to the Div Graduating seniors may request an addit	vision of Graduate ar		at semester, the student may: ing Education, for continued part-time study.
ENROLLMENT STATUS:			e University to certify you as a full-time 12 credits or more will certified as full-
FINANCIAL AID:	To maintain satisf financial aid eligib during each acaden	oility, stude nic year. S ner session	idemic progress (SAP) for continued ents must <u>complete</u> at least 21 credits Students may make up credits during a ins that immediately follow the term in surse
ATHLETICS:		h the Univ	versity's NCAA compliance officer to
VETERANS:			Affairs to ensure your benefits have not
PART-TIME STATUS APPROVED	Denied		

REGISTRAR'S SIGNATURE: _____ Date _____

Processed by: _____ *Date:* _____

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