CHANGE IN ENROLLMENT

Please complete this to request approval from Scholar Programs for enrollment changes. Once you receive approval, please complete the Scholar Programs Student Enrollment Status Change Form.

Today's Date: _____

SCHOLAR INFORMATION

Full Name: _____

Scholar Program: _____

Major: _____

Program Start Year: _____

ENROLLMENT CHANGE DETAILS

- ☐ Part-time/ Less than Full-time
- ☐ Semester Off
- ☐ Outgoing Transfer
- ☐ Other: _____
- ☐ Graduation
- ☐ Discontinuing Studies/Withdrawal

Effective Semester: _____

_____

Details regarding your enrollment change:

_____

_____

Scholar Signature: _____