



Graduate Exception for Half-Time Enrollment

Student's Name (Last, First, MI)

myWSU ID Number

Phone Number

INSTRUCTIONS >>>

Check the following box that applies to you...

I am currently receiving financial aid and request the Office of Financial Aid to consider me as a graduate half-time student for the purpose of federal student aid and in-school loan deferment for the semester. **Complete and return this form to the Office of Financial Aid, 203 Jardine Hall, Campus Box 24.**

I am not currently receiving financial aid and requesting the WSU Registrar's Office to consider me as a graduate half-time student for the purpose of in-school loan deferment. **Complete and return this form to the WSU Registrar's Office.**

SECTION A >>> STUDENT STATEMENT

I request to be considered for the graduate half-time* enrollment requirement for the _____ (Semester/Year). My workload includes any combination of courses, _____ research, or special studies that Wichita State University considers half-time.

Student's Signature (Required)

Date

Digital signature cannot be accepted

Warning: If you are a student with a history of academic probation, you must first meet with your advisor and the Registrar's Office before applying for graduate half-time enrollment.

Affirmation: I affirm that the information provided above is true and accurate to the best of my knowledge.

* Graduate half-time enrollment for federal student loans is a minimum of 5 credit hours for the fall and/or spring semesters or 3 credit hours for the summer term.

SECTION B >>> GRADUATE ADVISOR STATEMENT

The above-mentioned student is considered by the College of _____ as half-time for the _____ (Semester). I approve their workload includes any combination of academic courses, thesis, or other academic research, or special studies that Wichita State University considers half-time.

SIGNATURE & AFFIRMATION >>>

By signing below, I affirm and commit that the student's workload meets the requirement for half-time status.

Advisor's Printed Name

Advisor's Signature (Required)

Date

Digital signature cannot be accepted

Financial Aid Officer's Signature

Date

ROAENRL Updated

COA Reviewed