Part-Time Status Petition Form

Student:_____________________
Last Name                   First                        Middle
WFU ID: __________________
WFU-E-Mail: _________________ Telephone: __________________

TO THE STUDENT:

1. Students must request permission for Part-Time Status before the last day to add a course in a given semester. (See the appropriate academic calendar for specific dates.)
2. Students should make inquiries into how a change to Part-Time Status will affect their health insurance coverage, overall financial aid, and housing options before submitting this form.
3. “Approval for part-time status requires that students pay for such work on a per hour basis.”
4. “Petitions for part-time status after the last day to add a course will be denied, except in the case of special circumstances, and the student will be required to pay full tuition.”
5. “Part-time students may be ineligible for campus housing unless an exception is made by the Office of Residence Life and Housing.” (Items 3, 4 and 5 are excerpts from the 2010-2011 Bulletin, p. 27.)

FORMAL STATEMENT:

I request that my enrollment status be changed from full-time to part-time status for the _________________.
I have made inquiries into how this change will affect my eligibility for health insurance coverage,
financial aid, and housing options, and I am requesting to register for less than 12 hours during the
specified term.

SIGNED: __________________________________ DATE: ______________________
(Student’s Signature)

APPROVAL SIGNATURE: ____________________ DATE: ______________________
(Office of Academic Advising Staff Member)

Athlete? Yes____ No____ If yes: ____________________ DATE: ______________________
(Academic Counselor’s Signature)

** Students must meet with an Office of Academic Advising Staff Member before submitting this form.

FOR OFFICE USE ONLY

Banner Entry Date: ______________________ Approval Notification Date: ______________________
COMMENTS: ____________________________________________________________________________