



### Request for Part-time Scholarship Status

**REQUEST ONLY AVAILABLE WHEN STUDENT HAS NO OTHER COURSES AVAILABLE TO FILL  
PROGRESS TOWARDS DEGREE**

Students Name: \_\_\_\_\_ Date: \_\_\_\_\_

Dixie ID: \_\_\_\_\_ Major: \_\_\_\_\_

**Are you a Student Athlete?  Yes  No** *If yes, form must also be signed by NCAA Advisor.*

I would like to request permission to receive all/part of my scholarship while attending less than 15 credits for the  Fall  Spring semester of the \_\_\_\_\_ school year.

I am requesting:

- Full time (12+ cr.)
- ¾ time (9-11 cr.)
- ½ time (6-8 cr.)

For the following qualified reasons:

- Waiting to apply for a program
- About to Graduate
- Medical Issues that require PT Status  
*\*must include documentation*
- Other: \_\_\_\_\_

Please explain, in detail, the circumstances behind why you need part-time status:

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**By signing you signal your agreement to the following:**

- I understand that my scholarship may be reduced based on my enrollment percentage above and my enrollment status.
- I agree to forfeit the remainder of this semester’s total waiver amount.
- If approved, I will be required to sign a scholarship contract before my scholarship will disburse.

**Student Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**\*\*If approved**, we will adjust your scholarship amount based upon your enrollment percentage. Please note, this will use up a full semester of eligibility for your scholarship. You cannot have another part time semester added to the end of your scholarship term limit eligibility. (ex: use ½ semester for fall, we cannot add an additional semester for the other ½)

**\*\*\*Advisor must complete\*\*\***

**I have reviewed this student’s course options, and certify that the above is correct.**

**Advisor Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**\*\*\*NCAA Advisor must complete if student is an athlete\*\*\***

**NCAA Advisor Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

\*\*\*\*\*Office Use Only – Do Not Write Below This Line\*\*\*\*\*

GPA: \_\_\_\_\_ Completed Hours: \_\_\_\_\_ ( ) Approved ( ) Denied  
 Comments: ( ) Degree Audit Approved

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