

**UNIVERSITY OF NEVADA, LAS VEGAS
STUDENT FINANCIAL SERVICES**
232 REYNOLDS STUDENT SERVICES CENTER
4505 MARYLAND PARKWAY, BOX 452016
LAS VEGAS, NV 89154-2016

OFFICIAL USE ONLY

PHONE: (702) 895-3424
FAX: (702) 895-1353
EMAIL: sfsssc@cmail.nevada.edu
<http://financialaid.unlv.edu>

Academic year _____
Counselors Initials_____

ENROLLMENT CHANGE REQUEST

Please use this form to report changes to your enrollment if your financial aid has not already disbursed to your UNLV fee account **and** you have previously activated your financial aid with a different enrollment status which you now wish to change. For example, you activated as full-time enrollment but now wish to enroll in only half-time as defined in the enrollment chart below.

If your financial aid has already paid to your UNLV fee account, you do not need to complete an Enrollment Change Request. However, you will be subject to the Satisfactory Academic Progress requirements as detailed in the *Student Financial Assistance Guidebook* located at <http://financialaid.unlv.edu>.

UNLV Student Financial Services will determine what type and how much financial assistance you are eligible for based on your change in enrollment. You will be notified by mail of any changes in your financial aid award. You may also view updates online through your "My Aid" account. You may speak with a financial aid counselor for details on how your aid may be affected.

Enrollment Status

To be considered for most financial aid programs, you must be enrolled at least half-time, as defined in the enrollment chart below:

	Full-time	Three-quarter time	Half-time
Undergraduate	12 or more credits	9-11 credits	6-8 credits
Graduate	9 or more credits	Not applicable	5-8 credits
Law	12 or more credits	Not applicable	5-11 credits
Summer Law	8 or more credits	Not applicable	4-7 credits

Less than half-time enrollment is less than the half-time minimum enrollment as noted in the chart above.

PRINT NAME _____ SSN/L# _____

YOU MUST LIST THE HOURS AND CIRCLE THE SEMESTER YOU ARE CHANGING.

FROM _____ HRS TO _____ HRS SEMESTER: FALL SPRING SUMMER

FROM _____ HRS TO _____ HRS SEMESTER: FALL SPRING SUMMER

My signature below affirms that I have read and understood the enrollment information provided above. I understand that a change in enrollment may affect my eligibility for some awards.

STUDENT SIGNATURE _____ DATE _____