



Graduating Senior Part-time Enrollment Form

Please complete this form by the fee bill due date, as set by the Registrar's Office, in the semester in which you plan to graduate if you are enrolled in less than 12 hours. This form **MUST** be signed by your academic advisor prior to submission to the Scholarship Office – Sandel Hall 102.

Name: _____

CWID: _____

The above named student is graduating in _____ (term and year) semester and will be enrolled in only _____ hours during this semester, which are the remaining hours required for his or her degree.

Student Signature _____ Date _____

Your signature verifies that you, the student, acknowledge that you will maintain your scholarship at a pro-rated dollar amount based on your number of enrolled hours.

Academic Advisor Signature _____ Date _____

Submit this form to the ULM Scholarship Office:

ULM Scholarship Office – Sandel Hall 102
700 University Avenue
Monroe, LA 71209

**Questions should be directed to the ULM Scholarship Office at (318) 342-5321 or
scholarships@ulm.edu**