



# Saint Mary's College of California Declaration of Part-Time Enrollment Status

Students wishing to change their enrollment status to part-time must complete this declaration form and submit it, with appropriate signatures, to the Business Office. Part-time enrollment for billing purposes is defined as being **enrolled in less than 24 attempted units of coursework per academic year** (less than 12 attempted units per long semester not to exceed 24 units per year). For example, enrollment in 11 for fall-2 for Jan term-11 for spring, is 24 units and is NOT considered "part-time" for billing purposes. Students must be under 24 units for the academic year.

For Financial Aid eligibility, half time and ¾ time enrollment are determined by federal law and require enrollment in at least **6 units per semester to qualify for financial aid**. Part-time enrollment is NOT calculated on a semester basis, except in the instances of graduating seniors registered in a fall semester with LESS than 12 units needed to complete graduation requirements. All students must submit this form if declaring part-time enrollment- This form must be submitted to the Business Office by the end of the 4<sup>th</sup> week in the semester that the student realizes she/he will be attending part-time for the academic year. Part-time enrollment does NOT carry over to subsequent years. **Part-time students will be billed for partial credits and for Jan term.**

Part-time enrollment **will affect your tuition rate and your financial aid package**. Consult the current Saint Mary's College catalog or the Business Office to determine the current part-time tuition rate. Part-time enrollment may affect financial aid awards, campus housing eligibility, health insurance, and time to graduation. Students who drop to part-time status after the 4<sup>th</sup> week of the semester will be liable for the full medical insurance charge if they have not waived by the deadline. Students who drop to part-time before the 4<sup>th</sup> week will lose medical coverage if they are enrolled in the school health plan. **Therefore, the College requires that you meet with appropriate College representatives to assure you are aware of the impact a change of enrollment status will have on your circumstances.**

Before you will be allowed to declare part-time status, you must meet with the appropriate College representatives. The Business Office will adjust your tuition accordingly, following the submission of an appropriately signed declaration form and verification of attempted units for the academic year.

\_\_\_\_\_ Fall \_\_\_\_\_ Jan \_\_\_\_\_ Spring \_\_\_\_\_

_____	_____	_____	
<b>Student ID Number</b>	<b>Last Name</b>	<b>First Name</b>	

_____	_____	_____
SMC email address	Telephone number	<b>Student signature:</b> this signature is an acknowledgement that the student has read and understands the part-time enrollment procedures as stated above and in the College catalog.

### CONSULTATION ACKNOWLEDGEMENTS AND FINANCIAL AID/HOUSING APPROVAL

_____	_____
<b>Academic Advisor Signature:</b> I hereby acknowledge that I have reviewed the above named student's Academic plan and graduation timeline in consideration of part-time status for the academic year noted above.	<b>Date</b>

_____	_____
<b>Dean of Students Signature:</b> Approval to live in on-campus residence halls (only applicable if student intends to live on campus).	<b>Date</b>

_____	_____
<b>Financial Aid Counselor Signature:</b> I hereby acknowledge that I have informed the student of the Financial Aid implications for declaring part-time status (only applicable if financial aid is being awarded).	<b>Date</b>

_____	_____
<b>Business Office Signature:</b> Appropriate adjustments will be made to the student's account to reflect the current part-time tuition rate.	<b>Date</b>