

# ENROLLMENT STATUS CHANGE

LAST NAME \_\_\_\_\_ FIRST NAME \_\_\_\_\_ MI \_\_\_\_\_ SSN \_\_\_\_\_ ctcLink ID \_\_\_\_\_

Your financial aid award will be calculated initially based on full-time enrollment (12+ credit hours) for each quarter during the academic year. If you will/do not enroll in 12 or more credit hours during the 2019-2020 academic year, you must complete this form and return to the Financial Aid office by/before the first week of the quarter. Failure to complete this form accurately will delay your financial aid. It is recommended that students turn in this form *at least* fifteen days before the first day of class or the first anticipated disbursement date of the term for which they plan to change their enrollment status. Enrollment changes will not be processed AFTER the 5<sup>th</sup> day of the quarter; those who change enrollment after the 5<sup>th</sup> day are subject to OC's institutional tuition refund policy.

**If you have decided not to attend Olympic College during any of the quarters listed below, please check the "Not Enrolling" line for each of those terms that apply.**

**On the chart below, please check the appropriate answer for each term you plan to attend at Olympic College:**

	SUMMER 2023	FALL 2023	WINTER 2024	SPRING 2024
12 or more credits (full time)				
9 – 11 credits (3/4 time)				
6 – 8 credits (1/2 time)				
1–5 credits (less than 1/2 time)				
Not Enrolling				

**Student Certification Statement:**

**By submitting this form, I certify that all the information above is complete and correct.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Please mail/deliver/fax this form to the address or number listed below.**

Office use only			
Received	Scanned		Posted
			Form last updated: APR23FM
Revisions: <input type="checkbox"/> Yes <input type="checkbox"/> No		If yes, completed by: _____	Date: _____