



**Application for exemption to full-time enrollment requirement for
graduating seniors**
(12 undergraduate hours is considered full-time)

Students: To receive your Missouri State University scholarships, this form must be signed by you and your academic advisor. No exceptions can be granted for foundation or departmental scholarships specifying full-time enrollment status.

1. Student information (To be completed by the student):

Name: _____ SSN: _____

Address: _____

Home Phone: _____ Email: _____

Major: _____ Graduation Date: _____

Filed for graduation? Yes No This semester my Missouri State credit load is _____.

Circle the semester to which this form applies: Fall Spring Year _____

Student signature

Date

2. Advisor endorsement (To be completed by academic advisor):

As the academic advisor to _____, I hereby certify that this student need only complete _____ hours in order to graduate on the above specified date.

Signature of Academic Advisor

Date

Print name: _____

Phone: _____ Department: _____

3. To be completed by the Office of Student Financial Aid:

Approved ____ Denied ____

Signature of Scholarship Coordinator

Date

Student must submit completed form to:

Office of Student Financial Aid
901 South National Avenue, Springfield, Missouri 65897
(417) 836-5262 (800) 283-4243 <http://www.missouristate.edu/financialaid>