UNIVERSITY OF THE NORTH CAROLINA SCHOOL OF THE ARTS
Office of the Registrar

STUDENT STATUS APPROVAL FORM

I, _______________________________ Student Name

______________________________ Student ID No.

in the School of:

__ Dance __ Design & Production __ Drama

__ Filmmaking __ Music

___Undergraduate _____Graduate

hereby request permission to:

(check one box and fill in all appropriate information)

__ change my status from full-time to part-time (fewer than 12 credits; 9 for graduate students):

__ continue my part-time status

__ change my classification (C1, C2, G1, etc.) from ___ to ___

*Note to international students: If changing status from full-time to part-time, you must contact either TaWanna Archia or Ronit Weingarden prior to completing this form.*

This status is to take effect as of ___________________________

Date: Semester and Year

I am requesting this because: __________________________________________________________

________________________________________________________________________________

________________________________________________________________________________

________________________________________________________________________________

Number of credits I will register for, if status is part-time: _____________________________

Student’s Signature ___________________________ Today’s Date _________________________

Approval

We, the undersigned, give our approval of the above request.

__________________________________, ________________________________

Signature of Arts Dean Date

__________________________________, ________________________________

Signature of Dean or designee, Division of Liberal Arts (Undergraduates only)

[Note: if request is for continued part-time status due to completed DLA requirements, Dean or designee of DLA signature is not needed.]

It is the student’s responsibility to bring this signed form to the Registrar’s Office for processing.

2/19/2019