

Certification of Enrollment Status

To the student: Complete items 1 through 6 below and forward to your Major Professor and Department Chair/Program Director.

1. Date of Request _____
2. Semester for request _____
3. Do you have Federal Financial Aid? _____ Planned Graduation Date: _____
4. Student name and ID _____
5. Degree sought and department _____
6. Credit hours enrolled this semester _____
7. Requesting _____ ½ time certification for deferment/loan eligibility
_____ full-time certification for loan deferment/loan eligibility
_____ full-time certification for assistantship/fellowship funding (Please note:
You must carry nine credits in fall/spring for tuition remission.)

To the advisor and department chair/program director: Complete the following items and forward to the Graduate Studies office.

1. The student is currently enrolled for _____ credit hours for the fall/spring (circle one) semester and is actively pursuing a graduate degree at SDSMT.
2. The student is (please circle all that apply):
 - a. actively engaged in thesis/dissertation work which requires _____ hours of work per week during the entire semester. (This option may be used for a maximum of two semesters.)
 - b. employed as a teaching assistant for _____ hours per week.
 - c. employed as a research assistant for _____ hours per week.

Based on the above, we recommend that the student should be considered as:

_____ full-time student _____ half-time student

(major professor)

(date)

(department chair)

(date)

Approval:

(Dean of Graduate Education)

(Date)