



## STUDENT FINANCIAL SERVICES

Raker Student Success Center | 2<sup>nd</sup> Floor

1300 Nevada State Drive | Henderson, Nevada 89002

Billing/Student Accounts | sfs@nevadastate.edu | 702.992.2120 | FAX 702.992.2121

Financial Aid | finaid@nevadastate.edu | 702.992.2150 | FAX 702.992.2151

Veterans Benefits | va@nevadastate.edu | 702.992.2199 | FAX 702.992.2151

### Nevada State University Scholarship Exception Request

Use this form to request an exception to the full-time requirement for **NS** scholarships only.

This exception does **NOT** apply to any grants or non-NS Scholarships, such as Millennium Scholarship, Silver State Opportunity Grant, Federal Pell Grant, Federal Supplemental Education Opportunity Grant (FSEOG), Nevada State College Grant, Nevada State Access Grant, or Outside Agency Scholarships.

Exceptions will be granted only when you are unable to enroll full-time due to circumstances outside of your control. Examples of this include not needing to enroll full-time to complete your program in your final semester, or unavailability of the only remaining courses needed for you to complete your program.

Exceptions will not be approved if you choose not to enroll full-time when required courses are available.

If the exception is approved, the scholarship amount may be reduced based on the number of credits in which you are enrolled. For example, if you enroll in 6 credits instead of 12, you may receive  $6 \div 12 = 50\%$  of your normal award amount.

#### Section 1: To be completed by student

Name: \_\_\_\_\_ NSHE ID: \_\_\_\_\_

Term for which you are requesting the exception (select one): ☐ Fall ☐ Spring Year: \_\_\_\_\_

Reason for exception (select only one reason):

- ☐ There are no additional courses offered at NS needed to complete my program (advisor's signature required - go to Section 2).
- ☐ I have applied for graduation and do not need to enroll full-time in my final semester (go to Section 3).
- ☐ I am enrolled in a BAS program and co-enrolled at the College of Southern Nevada (go to Section 3).
- ☐ Other: Please attach a separate statement explaining the reason you are unable to enroll full-time (go to Section 3).

#### Section 2: To be completed by an NS Academic or Faculty Advisor (call 702-992-2160 for an appointment)

I have reviewed the student's program requirements and confirm the student is enrolled in all required courses currently offered by NS.

Advisor Signature

Date

Printed Name

NSHE ID

#### Section 3: Student must sign and submit to NS Financial Aid Office prior to the end of the semester requested.

By my signature affixed below:

1. I confirm Section 1 of this request is completed accurately to the best of my knowledge
2. I understand in order to be considered for approval, this request must be completed and submitted to NS Financial Aid **no later than the last day** of the NS semester indicated in Section 1.
3. I understand NS Financial Aid will email me, indicating approval or denial, within 14 days of receipt.
4. I will immediately notify NS Financial Aid if my enrollment changes at NS.

Student Signature

Date

