

Change of Status Form

					Fffective Da		FFICE USE ONLY	
Student Information Academic Unit	n:	_						
Term(s) Away	Fall 20	Sp	oring 20_		Sun	nmer 20	None	
Intended Return	Fall 20	Sp	oring 20_		Sun	nmer 20	_	
Student ID #								
Student Name								
Last Name Phone #		First Name Middle				ddle Initial		
Currently living on ca		Yes	No					
Are you a combined/dual degree student?		Yes	No 3					
Are you an international student?		Yes	No					
Address while away	from UR							
Phone # while away	from UR (if different)							
Towns of Changes								
Type of Change:								
	nce (check all that apply	<i>')</i>						
Degree Pending								
Financial					_			
	um	Re	emaining	g on cai	mpus?	Yes	No	
Internship								
Medical (additio	onal documents required	d for lea	ave and r	return)				
Military Service								
Other								
Pandemic Relate	ed							
Personal								
Study in USA	(School/College	e)						
Work								

Withdrawal (che	ck all tl	hat apply	<i>')</i>								
Deceased											
Financial											
Lack of Registration											
Medical (additiona			•			ırn)					
Other					_						
Pandemic Related											
Personal Transfer to											
Work					_						
WOIK											
Dismissal (Expulsion	sion)										
Academic											
Non-academic											
Suspension (Adn	ninistra [.]	tive)									
Academic	- IIII Ser G	<u></u>									
Non-academic											
Discontinue (Nev	ver atte	nded)									
Cancel											
Defer											
Enrollment Statu	ıs Chanş	ge 🦻									
Key: FT = full-time	HT = ł		LHT = le	ess than	half-tim	е X :	= no enrol	ment/no	on-deferra	ble loan stat	us
ney		•		-		•		•	on deterra		
					to						
	FT	HT	LHT	Χ		FT	HT	LHT	Χ		
 Reclassification 	Cla	SS	to	Class			Expected	complet	tion date		
				-			·	•	_		
• • •											
ReturnsReactivation (Returns)	ırn fron	104)	Evnoc	tod con	nlotion	data					
•		•									
Readmission (Retu	ırn fron	า W/D)	Exped	ted con	npletion	date _					
Reinstatement (No	o time a	iway)	Exped	cted con	npletion	date _					
lotes/Comments:											

	FOR OFFICE U	SE ONLY	
Fee/Refund/Tuition/Schola	rship Changes:		
Approval:			
Signature	Date// Signat	ture	Date//
Signature	Date//_ Signat	ture	Date//
Distribution List:			
Admissions	Dean/Admin	IT	Univ Counseling Ctr
Advisor(s)	Department	NROTC	Univ Health Services
Athletics/Recreation	Financial Aid	OMSA	Other:
Bursar	GEPA	Registrar	
Campus Mail Center	ID Office/Dining Services	Residential Life	
Dean of Students	Int'l Services Office	Student Employment	
Other Academic Unit Speci	fic Information:		