

Financial Aid and Scholarships
University of California, Davis
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Davis, CA 95616-8596

FAX: (530) 752-1587
financialaid.ucdavis.edu
my.ucdavis.edu/ask_us

2018-2019 Part-Time OR Career Staff Change Form

Name: _____ Student ID: _____

Email: _____ *Phone: _____

*If this is a new phone number, please update your information on [SISWeb](#)

CHANGE TO PART-TIME, CAREER STAFF, OR IN-ABSENTIA STATUS

CHANGE STATUS TO: PART-TIME CAREER STAFF IN-ABSENTIA (Graduate only)

I understand that the amount allowed in my budget for registration fees will be adjusted. If Part-Time, to be eligible to receive Financial Aid I must enroll in a minimum of 6 units, and waitlisted units do not count as enrolled. I have completed the necessary paperwork with the Office of the University Registrar and I am/will be enrolled in the Part-Time Degree Program during:

Fall Quarter - Number of Units: _____

Winter Quarter - Number of Units: _____

Spring Quarter - Number of Units: _____

Additional Comments:

I certify that to the best of my knowledge all information provided on this form is complete and correct.

Student's Signature: _____ Date: _____