

Student Name

## EDGEWOOD COLLEGE FINANCIAL AID

(P) 608-663-4300 | (F) 608-663-3495 | ecentral@edgewood.edu | 1000 Edgewood College Dr., Madison, WI 53711

## **Edgewood Grants/Scholarships-Less Than Fulltime Appeal**

Edgewood scholarships and grants require continuous *fulltime* enrollment. If you drop below fulltime status, you must appeal to have your Edgewood scholarships and/or grants pro-rated based on your enrollment status.

- Appeals to prorate Edgewood scholarships and/or grants are only approved for the last 2 semesters before graduation.
  - Exception: if all general education requirements (Tags) have been completed or remaining tags will be completed by major course requirements; earlier appeals may be considered.
- Approved appeals will prorate the scholarship and/or grant based on the enrollment status.

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Edgewood ID			
Major			
Expected graduat	ion date		
Outline the numb	er of cre	dits you will take each semester until	til graduating:
Semester/Year		Number of credits	
Semester/Year		Number of credits	
Semester/Year		Number of credits	
Semester/Year		Number of credits	
	2 semeste	2 semesters ers before graduation completed unless they will be completed by i	y major course requirements
Student Signature	e:		Date:

Return to Edgewood Central:

1000 Edgewood College Drive, Madison, WI 53711; Fax: 608-663-3495; Scan/Email: ecentral@edgewood.edu