

WESLEYAN UNIVERSITY
GRADUATE/GRADUATE LIBERAL STUDIES STUDENT MATRICULATION CONFIRMATION

ACADEMIC YEAR 2009-2010

This form is to be completed by the Office of the Program in which the student is enrolled and returned to the Office of Financial Aid, Attention – Margaret Neale. Please complete only after the student has registered for the current semester.

Student Name _____
(last) (first) (middle)

Wes I.D. _____ Wesleyan Employee ___ yes ___ no

Student's Current Academic Status:

Student is **Matriculated** in the following Program: ___ M. A. ___ Ph D. ___ MALS ___ C.A.S.

Student is: ___ 1st yr ___ 2nd yr ___ 3rd yr ___ 4th yr ___ 5th yr

Student is NOT officially matriculated: _____

Is student receiving a scholarship? ___ yes ___ no If yes, \$ _____
(amount)

Is student receiving a stipend? ___ yes ___ no

9 months \$ _____
(amount)

12 months \$ _____
(amount)

Tuition Rate Per Course \$ _____ Total Tuition \$ _____

Is student receiving tuition remission? ___ yes ___ no

Tuition remission is: Full \$ _____ or Partial \$ _____
(amount) (amount)

Tuition remission for _____ courses: ___ June Immersion '09 ___ June Intensive '09 ___ August Immersion '09
(number) ___ August Immersion 2 '09 ___ Summer '09 ___ Fall '09 ___ Spring '10

Indicate enrollment status for current semester only.

| | June 1wk | June 3wk | Aug Imm | Aug Imm 2 | SUMMER | FALL | SPRING |
|-------------------------------|----------|----------|---------|-----------|--------|-------|--------|
| No. Units/Credits | _____ | _____ | _____ | _____ | _____ | _____ | _____ |
| Full time (yes or no) | _____ | _____ | _____ | _____ | _____ | _____ | _____ |
| Half-time or more (yes or no) | _____ | _____ | _____ | _____ | _____ | _____ | _____ |
| Anticipated Graduation Date: | _____ | | | | | | |
| Program Office: | _____ | | | | | | |

Signature _____

Date _____

(Registrar GLSP or Grad Office)