Worcester Polytechnic Institute

Office of the Registrar

Graduate Enrollment Status Change Form

Please Print		
Name:	Student ID #:	
Major:	Email:	
Student Signature:	Date:	
Current Enrollment Status ☐ Full-time Graduate Student		
☐ Part-time Graduate Student		
New Enrollment Status ☐ Full-time Graduate Student ☐ Part-time Graduate Student		
For Office Use Only		
Registrar's Office:	Date:	

Please submit completed form to the Office of the Registrar

508-831-5211 (tel) 508-831-5931 (fax)