



UNIVERSITY
of HAWAI'I®
WEST O'AHU

CONCURRENT ENROLLMENT REQUEST FORM
FOR
FINANCIAL AID RECIPIENTS

STUDENT'S NAME: _____

UH ID: _____

Major/Program: _____

UH Email: _____

Semester &
Year of Request:

Fall _____

Spring _____

Course _____

Concurrent UH Campus _____

Course _____

Concurrent UH Campus _____

Course _____

Concurrent UH Campus _____

IMPORTANT: YOU MUST BE ENROLLED IN AT LEAST 6 – CREDITS WITH UHWO BEFORE YOUR CONCURRENT ENROLLMENT WILL BE CONSIDERED. ONLY COURSES APPLICABLE & TRANSFERABLE TOWARDS YOUR UHWO DEGREE REQUIREMENTS WILL BE CONSIDERED FOR FINANCIAL AID PURPOSES. YOU MUST SUBMIT THE COMPLETED FORM WITH ALL REQUIRED SIGNATURES TO THE FINANCIAL AID OFFICE FOR PROCESSING.

As a UHWO financial aid recipient who is concurrently enrolled at another University of Hawai'i campus, I understand that I must do all of the following:

- 1) Be enrolled and maintain Half-time enrollment (6-credits) with UH West Oahu for the semester.
- 2) Seek the approval and signature of a UHWO Academic Advisor to insure that the concurrent courses indicated above are applicable and transferable toward my degree program at UH West Oahu.
- 3) Make a separate payment for the charges at the other UH campus at which I am concurrently enrolled, as my financial aid will only be automatically applied toward my UH West Oahu charges.
- 4) Inform the UHWO Financial Aid Office (e-mail: finaid@uhwo.hawaii.edu) of any changes to my concurrent registration plans as stated above (e.g., change of class, drop a class or withdraw).
- 5) Understand that the UHWO Financial Aid Office will include the above stated course(s) in their review of my meeting the Satisfactory Academic Progress policy requirements. If I should fail the course(s) or withdraw, I understand that I may become ineligible for continued financial aid.
- 6) At the end of the semester, I will complete an Academic Record Update form to transfer the course(s) approved. Submit it to: University of Hawai'i – West O'ahu, Student Services Office, 96-129 Ala Ike Street, Pearl City, HI 96782. The form can be found on the following website: <http://westoahu.hawaii.edu/pdfs/academicrecupdate4.pdf>.

Signature of Student

Date

For Official Use Only: _____ **Date Approved** _____
UHWO Academic Advisor Signature

Advisor Notes: _____

FinAid Use Only: _____ **Date Processed:** _____

Enrollment: _____ @UHWO / _____ @ _____ = _____
 CR CR Campus Total Credits

96-129 Ala 'Ike
 Pearl City, Hawai'i 96782
 Telephone: (808) 454-4700
 Fax: (808) 453-6075