SMART
SCIENCE, MATHEMATICS & RESEARCH FOR TRANSFORMATION
PART OF THE NATIONAL DEFENSE EDUCATION PROGRAM

SMART Scholarship

Science, Mathematics & Research for Transformation

Additional Tuition Request

Awardee Type:
☐ Retention
☐ Recruitment

EMAIL COMPLETED FORM TO:
smart@nps.edu

Type of Request:
☐ Summer Tuition
☐ Winter Tuition

Policy Statement: SMART funds full-time tuition and approved related educational fees during the Academic year (fall through spring). The Academic Year does not include summer or condensed winter terms. Enrollment and/or completion of coursework during summer and/or condensed winter terms, whether taken online or at a physical location, requires prior authorization from the SPO and submission of the *Additional Tuition Request* available on the SMART website.

SECTION 1 – Participant Information

Name (LAST, First, MI):	**Cohort Year:**
Phone:	**Email:**
Sponsoring Service:	**Sponsoring Facility:**
Facility POC Name:	**Facility POC Email:**

SECTION 2 – Impact/Requirement Information

Degree Level Funded by SMART: ☐ BS ☐ BS/MS ☐ MS ☐ MS/PhD ☐ PhD	**Field of Study:**
Will internship requirement be met? ☐ Yes ☐ No	**If no, you must submit an Internship/Site Waiver Request.**
Will this impact your graduation date? ☐ Yes ☐ No	**If yes, you must submit an Award Length Change Request.**
Will this request cause you to drop below full time status in future academic terms? ☐ Yes ☐ No	**If yes, you must supplement the term(s) with additional coursework to ensure that you have full-time status and submit a revised Educational Work Plan.**

SECTION 3 – Coursework Details

Reason for Additional Coursework (If your graduation date will be changed due to your coursework, please explain):	
Dates of Additional Coursework:	
Course Title:	**Credit Hours/Units:**
Course Title:	**Credit Hours/Units:**

SECTION 4– Academic Institution Information

Name of Institution:	
Advisor Name:	**Advisor Email:**

SECTION 5 – Statement of Understanding

By signing this form I understand that approval of my Additional Tuition Request is determined on a case-by-case basis and at the discretion of the SMART Program Office. I also understand that if my request is rejected and I engage in additonal courses without prior approval of the SMART Program Office, I may be dismissed from the program and be responsible for the prompt reimbursement of any and all funds expended under the program by the U.S. Government on my behalf.

Please Check:

☐ **I accept these terms.** ☐ **I do not accept these terms.**

☐ **I have attached a signed letter from my academic advisor on official university letterhead confirming the coursework is required for graduation and cannot be taken during another term.**

☐ **This Additional Tuition Request WILL NOT reduce my full-time student status.**

Participant Signature	**Date:**

----------***DO NOT WRITE BELOW THIS DOTTED LINE / SMART PROGAM OFFICE USE ONLY***----------

SECTION 6 – SMART Program Office Review

☐ **Attached service liaison verification letter, if applicable.** ☐ **Documentation is complete for SMART Program Manager.**

Cohort Administrator Name:	**Cohort Administrator Signature:**	**Date:**

☐ **APPROVED** ☐ **REJECTED**

SMART Program Manager Signature:	**Date:**