

REQUEST FOR LESS THAN FULL-TIME ENROLLMENT

Complete section A and then have your *academic advisor* complete section B summarizing the reason for the reduced number of credits.

A. To be completed by student:

FAMILY NAME _____ FIRST NAME _____
STUDENT ID# _____ PHONE _____
LOCAL ADDRESS _____
E-MAIL _____ COLLEGE _____ DEPT _____
DEGREE: B.S./B.A. _____ MASTER _____ CREDITS TO DATE _____
ANTICIPATED COMPLETION DATE: _____
COMPLETION DATE ON CURRENT I-20 _____

B. To be completed by Academic Advisor

In general, permission to register for less than full-time should occur rarely in a student's career. By immigration law the international student should be full time (12 credits UG/ 9 credits G) during each fall and spring semester. If the student's activity is equivalent to full-time, but actually requires less than full-time registration (e.g. graduate students), this form is to be endorsed by the academic advisor and forwarded to International Student Services (AU101).

SEMESTER REQUESTED _____

NUMBER OF CREDITS OF REGISTRATION _____

_____ Initial difficulty with English language (can only be used in student's first semester)

_____ Initial difficulty with reading requirements (can only be used in student's first semester)

_____ Unfamiliarity with American teaching methods

_____ Placement in improper course level

_____ To finish the degree program this semester

_____ Medical reason (attach physician's letter)

_____ This student is a graduate student who has enrolled in all credits possible for this semester. Though less than the standard 9-credit hours for full-time enrollment, as the student's academic advisor, I consider the student full-time.

I endorse and recommend less than full-time registration for this student during the semester requested.

Academic Advisor Signature: _____

Printed Name: _____ Date: _____

Campus Address: _____ Phone: _____

International Student Services Office Use ONLY

Approved by: _____ Date: _____