

**REQUEST FOR REDUCED COURSE LOAD (RCL)**

International Studies Program  
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**SEMESTER AND YEAR** \_\_\_\_\_

Every semester you must complete a certain minimum number of credits to be considered a full-time student for immigration purposes. For undergraduates, this means that you must register for and successfully complete 12 credits each in Fall and Spring Semesters.

The U.S. Citizenship and Immigration Services (USCIS) allows the Designated School Official (DSO) to make exceptions to the full-time requirement in three types of situations only. If your reason for requesting approval for less than full-time enrollment meets one of the three following criteria, please indicate below and attach documentation from your doctor or professor. Then schedule an appointment to meet with the Director of International Studies for approval BEFORE dropping below full-time.

\_\_\_\_\_ I am compelled by **illness or other medical condition** to interrupt or reduce my course of study. (Attach a letter from your doctor specifically indicating that s/he recommends that you take a semester off or reduce your credit load for medical reasons.)

\_\_\_\_\_ I wish to drop a course due to **academic difficulties**. Academic difficulty is defined by USCIS as **initial difficulty with the English language or reading requirements, unfamiliarity with U.S. teaching methods, or improper course placement**. Please note that students authorized for this exception must still maintain a half-time credit load (a minimum of 6 credit hours). Also, a student who has been previously authorized to drop below a full course of study due to academic difficulties is NOT eligible for a second authorization due to academic difficulties while pursuing a course of study at that program level. (You must obtain a letter from your professor or academic advisor recommending a reduced course load for one semester. Attach academic advisor’s letter to this form).

\_\_\_\_\_ I **expect to graduate at the end of this semester** and need less than the full-time credit load to complete my coursework. (Attach a copy of your degree audit and a letter from your academic advisor confirming this).

STUDENT SIGNATURE	DATE
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**APPROVAL BY THE INTERNATIONAL STUDIES PROGRAM:**

DSO/DIRECTOR OF INTERNATIONAL STUDIES PROGRAM SIGNATURE	DATE
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For Office Use Only: Completed by: _____ on ____/____/____
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