

DREAM. DISCOVER. ACCOMPLISH.

USCIS regulations require international students to be enrolled in a full course of study while pursuing a degree in the United States under an F-1 student visa. Full-time enrollment is usually defined as **12** credits for an Undergraduate program and **9** credits for a Graduate program per semester; however, your program office dictates the actual number of credits necessary to maintain proper enrollment. The student should **NOT** drop any coursework until after obtaining approval from the International Student Service Office. All submissions must be completed within the add/drop week of the current semester. The **Reduced Course Load (RCL)** authorization indicates **maintenance of an F-1 status only**, it does **NOT** change student's records in the **Registrar's Office**. **IMPORTANT:** The student must resume a full course of study at the next available semester (excluding the Summer) in order to maintain student status. Also, imminent danger of failing a class is not a permissible reason for authorizing a reduced course load.

A. To be completed by the student:

Student ID No.: _____ Program of Study: _____

Last Name: _____ First Name: _____

Address: _____ / _____ / _____ / _____
 Street City State Zip

Phone No.: (____) _____ - _____, E-mail: _____

Completion Date on Current I-20: _____

(Student's Signature) Today's Date

B. To be completed by the Academic Advisor: (Submit to DSO/ Int'l Student Advisor for final approval)
 Please provide us with the basic information requested below by indicating the appropriate reason for reduced course load.
 # of Credits earned to date: _____ Anticipated Completion Date: _____ Semester RCL Requested: _____

Reason for Reduced Course Load (RCL):
 I recommend that this student be certified full-time for the above semester, based on the following:

Completion of Course of Study: The Student is in the final semester or session and fewer courses are need to complete the course of study, therefore DSO may authorize a reduced course load during the last semester. [8 CFR 214.2(f)(6)(i)(B)].

Academic Difficulties: (One time exception only - must be used in the student's first semester/term at VIU). Student has initial academic difficulties that make full time registration unreasonable. Student is facing initial difficulties with the *English language or reading requirements, unfamiliarity with U.S. teaching methods, or improper course level placement.* [8CFR 214.2(f)(6)(iii)]. Student must be registered for a minimum of 6 credit hours. The student must resume a full course of study at the next available semester (excluding the Summer) in order to maintain student status. A student previously authorized to drop below a full course of study due to academic difficulties is NOT eligible for a second authorization at that program.

Please explain appropriate reason: _____

COMMENTS (continue on back, if necessary): _____

I endorse and recommend less than full-time registration for the semester requested for this student. This request for permission is based on the reason indicated above.

Name of School Dean _____ **Signature of School Dean:** _____ **Date:** _____
 (Please Print) (for the current program)

Name of School Dean _____ **Signature of School Dean:** _____ **Date:** _____
 (Please Print) (for the new program, if applicable)

C. To be completed by DSO/Int'l Student Advisor:

Medical Conditions: The student is prevented by a medical condition from pursuing a full course of study. A letter from a licensed medical doctor or licensed clinical psychologist residing in the United States must be attached. **The letter should include:** (a) description of the medical problem, including how this affects the student's ability to study; (b) details of treatment; (c) recommendation of when the student may resume taking full-time course work. [8 CFR 214.2(f)(5)(iv)]. ISSO must re-authorize the drop below full-course of study each semester, and new documentation must be provided. (Total time cannot exceed 12 months per degree program). Student has to fill out the **Leave of Absence form**, and submit it to ISSO at the beginning of the semester.

Signature of DSO: _____ **Date:** _____

D. To be completed by DSO or Int'l Student Advisor:

RCL Approval Granted **RCL Approval Denied**

Signature of DSO: _____ **Date:** _____

Rev: 12/2016 ISSO