REQUEST FOR LESS THAN FULL-TIME ENROLLMENT COVER FORM--UNDERGRADUATE

- ✓ International students in F-1 or J-1status is bound by U.S. Federal regulations to enroll in a full course of study each semester
- ✓ Full time defined: 9 credit hours for graduate; 12 credit hours for undergraduate each semester
- ✓ A reduced course load based on a financial need is NOT a qualifying reason.

An F-1 student who drops below a full course of study <u>without prior approval</u> of the International Student Advisor will be considered illegal.

INSTRUCTIONS: Students will need to have this entire form completed before returning it to the International Office. Your request will be reviewed and if you have not received less than full-time in a previous semester and there are no other issues, your request will be processed. If you have requested less than full-time in a previous semester, you will receive an email with an appointment time to meet with Carol.

SECTION TO BE COMPLETED BY STUDENT

Student's name:					
Family/last name	Given/first name				
FHSU ID#	Email address				
Semester less than full-time is being rec	quested: Fall	20	Spring 20		
Have you applied for less than full time If yes, please provide semester(s) and y					
Request for Approval Students may only be approved for acade reduced course load for academic reason separate form would need to be completed in a student's career. Therefore, approved. These situations will be review should be full time during each fall & sp	ons, a reduced courseted. In general, pe multiple requests to ewed on an individu	se load due to ermission to re o enroll in cred	medical reasons i gister for less than dit hours less than	is still available and a n full time should occur n full time WILL NOT be	
Signature of International Student Adv	risor:		[Date	
Student's Confirmation: I understand purpose of maintaining my F-1 or J-1 not eligibility to work on-campus or to recepolicies. I also understand it is my response y classes I choose to drop.	on-immigrant status ive scholarships and	and that a red d/or other stud	duced course load lents benefits in a	I may disqualify me from accordance with university	
Signature of Student:			Date_		
Apply for Program Completion: You available to complete once the semeste	•	_	ipletion and pay a	រ \$50 fee in Workday. This is	
ISSO Verified this is completeYE	ESNO Sta	aff Initials:		Date	

REQUEST FOR LESS THAN FULL-TIME ENROLLMENT FORM UNDERGRADUATE

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Student's name:		Civan/first name					
Family/last name		Given/first name					
FHSU ID#	Semester Less than Fu	ıll-Time Requested:	Fall 20	Spring 20			
ACADEMIC REASONS Students may only be approved for a reduced course load for academic reaform would need to be completed. It student's career. By immigration law If the student's activity is equivalent this form is to be endorsed by the Act To be completed by Academic Adv 1improper course level 2initial difficulties with 3initial difficulties with 4unfamiliarity with U.S.	asons, a reduced course in general, permission to by, the international study to full time but actually ademic Advisor and for tisor or Instructor of the placement (can apply if the English language reading requirements	load due to medical rearest register for less than front should be full time requires less than full warded to the International recourse	asons is still available time should of during each fall time registration ional Student Action or in jeopardy of	ilable and separate occur rarely in a & spring semester. a (e.g. writing thesis), lvisor. f failing a course).			
 The student needs less than a full course load to finish the degree program this semester The student has completed formal course work and is preparing for a comprehensive program The student has completed formal course work and is engaging in thesis or dissertation research The student must take a reduced course load to fulfill the terms of a graduate, teaching, or research assistantship. 							
For the reasons cited above, I recommend the above named student to be allowed to take a reduced course load:							
Instructor/Advisor's Signature:		Date:					
Instructor/Advisor's name:			Phone:				
**You must provide a copy of your d than full time form. You may obtain Picken Hall 307.	_			_			
Student's Confirmation: I understand of maintaining my F-1 non-immigrand on-campus or to receive scholarships understand it is my responsibility to do drop.	t status and that a redu and/or other students	ced course load may d benefits in accordance	isqualify me froi with university	m eligibility to work policies. I also			
Signature of Student:		Da	te				
Approval Signature of International	Student Advisor:		Da	ite			