

## Request for Less Than Full-Time Enrollment

### To be completed by Student

Name: _____	Student ID # _____	
Local Address _____	Telephone _____	
College/Department _____	Semester & Year began current degree _____	
Degree: B.S./B.A. _____	Master _____	Credits required for this degree _____
Credits accumulated to date: _____		Anticipated graduation date: _____
Completion date on current I-20: _____		Credits this semester: _____

### To be completed by Advisor

In general, permission to register for less than full-time should occur rarely in a student's career. By immigration law, the international students should be full-time during each fall and spring semester. If the student's activity is equivalent to full-time actually requires less than full-time registration (e.g., writing thesis), this form is to be endorsed by the academic advisor and forwarded to the Foreign Student Advisor in the Office of International Students and Scholars, University Center 405.

Semester Requested: \_\_\_\_\_ Intended # of Credits of Registration: \_\_\_\_\_

- The student is having initial difficulty with English language or reading requirements (available only in student's first semester).
- The student is unfamiliar with American teaching/educational methods (available only in student's first semester).
- The student has been placed in the improper course level (must have documentation from advisor).
- The student will complete his/her final semester (note: if student is authorized for under-enrollment based on this reason and does not graduate at the end of the authorized semester, the student may lose his/her legal status).
- The student has completed formal coursework and is engaged in thesis research.
- The student has a medical reason for needing to be registered less than full-time (must be fully documented by attending medical doctor).

I endorse and recommend less than full time registration for the semester requested for this student as indicated. This request for permission to register for less than full time is based on the above reason and \_\_\_will/\_\_\_will not affect the expected completion date (indicated above the box) on current immigration document.

Academic Advisor: \_\_\_\_\_ Print Name: \_\_\_\_\_ Date: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Foreign Student Advisor: \_\_\_\_\_ Date: \_\_\_\_\_

