REQUEST FOR LESS THAN FULL-TIME ENROLLMENT FORM
2017 Spring Semester

Part I: To be completed by the student. Please type or print clearly:

Last Name: ________________________  First Name: ____________________  ID#: ______
Phone________________________________ Email: ________________________________
Credits needed to graduate: _______  Expected graduation date: ________________
Total # of Credits to date: __________  Credits this semester: ________

I request authorization to carry/drop to ______ credits hour the above semester because:

☐ The student is having difficulty with English language or reading requirements
☐ The Student is unfamiliar with American teaching methods
☐ The student has been placed in an improper course level
☐ The student has a graduate assistantship and although under enrolled this semester will
  accumulate a minimum of 16 credits during the academic year
☐ The student has less than a full course load required finishing the degree program this semester
☐ The student has completed formal course work and is preparing for a comprehensive exam
☐ The student has completed formal course work and is engaged in thesis or dissertation research.
☐ The student has a medical reason for needing to be registered less than full time (attach medical
  excuse).

Approved: Doctor: ______________________________________

☐ Other (explanation on back of this sheet)

Part II: To be completed by the Academic Advisor.

I certify that the above information is correct. The educational implications have been
reviewed and the student advised appropriately.

_________________________    ___________________________     _______________
Name of Academic Advisor (printed)            Signature            Date

Part III: To be completed by the Designated School Officer.

The student is granted an exception to full course of study rule and is considered to be
fulfilling the full course of student requirement according to USCIS regulations.

________________________      _____________________       _____________
Name of Designated School Officer (printed)            Signature            Date