



International Programs

Request for Reduced Course Load Authorization

Student's Name: _____ Date: _____ MSU ID#: _____

Major/Degree Level: _____ Expected date of graduation (Semester/Year): _____

Semester for which a RCL is being requested: Fall 20____ Spring 20 ____

Student Certification

- I certify that the information provided in my request for a Reduced Course Load is correct and complete, and that the Reduced Course Load authorization is valid only for the semester indicated above.
- I will not drop below full time unless I receive a new I-20 with the RCL approval on it. Dropping below full time without RCL approval is a violation of my status, and will result in the termination of my F-1 visa status.
- If approved, I must still enroll in at least six (6) credits as an undergraduate student, or five (5) credits as a graduate student, with at least three (3) face-to-face credits included.
- ***RCL based on graduation only:** I am NOT eligible for any future I-20 program extensions. My program end date will be shorted to the final day of the semester for which the graduation RCL is granted.

Student's signature

Date

*This section is to be completed by the **Academic Advisor** or **Physician** (if the request is for medical reasons).*

The student named above is an international student in F-1 status and is applying for a reduced course load (8 C.F.R. 214.2 (f)(10)(ii)). Your verification of the student's eligibility for a reduced course load is required to ensure that Minot State University is in compliance with these regulations. If you have questions about this form, please contact Erin Anderson, International Student Coordinator, at 858-3348 or erin.marie.anderson@minotstateu.edu.

I recommend that the student named above receive authorization to take a reduced course load for the reason cited below:

- Graduating:** Student is in their final semester and needs less than fulltime enrollment to complete degree requirements. Student will NOT be eligible for any future I-20 program extensions.
- Academic Difficulties in first semester:** (*permitted only once per degree/program level*). Choose one below:
 - a. Student is in their first academic term and is having difficulties with the English language or reading requirements.
 - b. Student is in their first academic term and is unfamiliar with U.S. teaching methods.
 - c. Student has been advised to drop a course because of improper course level placement.
- Student has completed required program coursework and is working on a thesis/dissertation or preparing for a comprehensive examination.
- Student holds an Academic Graduate Assistantship (Appointment letter must be attached).
- Medical:** (attach letter from physician or psychologist and medical documentation on office letterhead, with full contact information). Requests can be granted for this reason only for an aggregate of 12 months at a particular program level. The required minimum enrollment does not apply to a reduced course load for medical reasons. The Office of International Programs will follow the doctor's recommendations.

Advisor/Physician Signature: _____ Printed Name: _____ Date: _____

Your relationship to the student: Academic Advisor Assistantship Supervisor Attending Physician Psychologist

International Programs Notes: RCL Approved RCL Denied DSO Signature: _____

Notation made in SEVIS Program end date shortened if needed I-20 Printed Date: _____