

## F-1 Student Reduced Course Load (RCL) Request Form

This form is to be used by students to request approval for Reduced Course Load (RCL) enrollment from the FSW- Center for International Education (CIE). If this is a "Final Term" RCL, you may drop your request at the CIE office. To submit academic or medical RCL requests, please schedule an appointment with an International Student advisor.

| LAST NAME          | FIRST NAME |      | MIDDLE NAME              | FSW ID#    |
|--------------------|------------|------|--------------------------|------------|
|                    |            |      |                          |            |
| DATE OF BIRTH      |            |      | NUMBER of F-2 DEPENDENTS | SEVIS ID # |
| (mm-dd-yyyy)       | FEMALE     | MALE |                          | N          |
|                    |            |      |                          |            |
| Telephone:         |            |      | Email:                   |            |
|                    |            |      |                          |            |
| Current address: _ |            |      |                          |            |
|                    |            |      |                          |            |

## Important notes: Please read carefully.

- Read the Reduced Course Load information on the CIE website before completing this request form.
- Full time is 12 credits per semester.
- You must either be full-time enrolled or approved for RCL by the Drop/Add deadline set by the Registrar each term.
- If you want to withdraw from a course which will cause you to be less than full time after the Drop/Add deadline, you must be approved for RCL before dropping the course.
- Failure to gain RCL approval will cause loss of F-1 status and termination of your SEVIS record.

## **Checklist of required documents**

- A copy of your Form <u>I-94</u>
- Copies of your previous and current I-20 (pages 1 & 3)
- A letter written by a licensed medical or osteopathic doctor or licensed clinical psychologist (for medical reasons)
- A letter written by an academic advisor as well as one from the student (for academic reasons) following the instructions on the CIE website.

## Read the statement below, sign and date:

| I certify that I have read the request form instructions and information in full, and to the best of | my    |
|--|-------|
| knowledge, the information I have provided is accurate. I understand that I must have FSW appl       | roved |
| health insurance for the duration of my F-1 status. I also understand that I must report address     |       |
| changes to CIE and the registrar's office within 10 days of any change in current (U.S.) or perma    | nent  |
| (out-of-U.S.) address.   |       |

| Signature | Date |
|-----------|------|
| -         |      |