Cal State LA - IPGE
Telephone: 323.343.3170
Facsimile: 323.343.6478

INTERNATIONAL
CALIFORNIA STATE UNIVERSITY, LOS ANGELES

Application for Reduced Course Load

All international students on F-1 are required to be enrolled full time during the academic year (Undergraduates-12 units; Graduates-8 units). USCIS regulation allows students to be enrolled less than full time ONLY in specific situations. **Prior approval** from IPGE is required before a student can drop below a full course load. Students who fail to obtain approval will be considered out of status and the violation will be reported to U.S. Department of Homeland Security. Your SEVIS record will be terminated. All requests must be submitted to the International Programs and Global Engagement Office no later than the **ADD DEADLINE** of the term.

Student's Information: ☐ Undergraduate ☐ Graduate

First Name	Last Name	CIN
Email	**SEVIS ID**	**Major**

Applying Semester & Year: FALL SPRING YEAR:_____ Proposed Units:_____

SIGNATURE FROM DEPARTMENT/ACADEMIC ADVISOR IS REQUIRED FOR REASON A or B

☐ **REASON A: Academic Difficulty**

Reduce course load caused by academic difficulty can be authorized **one time** per academic level within the first year of studies in the program and a minimum of 6 units of enrollment is required. (please check one reason below)

- ☐ Initial difficulties with English language and/or reading requirements
- ☐ Unfamiliarity with US teaching methods
- ☐ Withdrawal from a course due to improper course level placement

☐ **REASON B: Final Coursework Before Thesis/Comprehensive Exam (Graduate Student Only)**

Student must be in the last term of coursework and enroll in Comprehensive Exam or Thesis the following quarter (except summer). Otherwise, the Student is in violation of his/her status.

FOR DEPARTMENT/ACADEMIC ADVISOR FOR REASON A or B

Advisor's Name /Title	Advisor's Signature	Date
Department	Telephone Ext.	

SIGNATURE FROM DEPARTMENT/ACADEMIC ADVISOR IS NOT REQUIRED FOR REASON C, D or E

☐ **REASON C: Completion of Degree program**

Student must enroll in at least one course required for degree at Cal State LA and must complete the degree in the term as requested.

☐ **REASON D: Dual Registration**

Please attach proof of registration receipts for the other school that shows your name, school, class, number of units, & payment receipt. Please note: if you are registered in full-time units at Cal State LA, and you wish to take additional units at another school. You DO NOT need to submit a RCL form.

☐ **REASON E: Illness/ Medical Condition**

Please attach an official letter on letterhead, as described below. The letter must:
1) Be signed by a licensed U.S. medical doctor, doctor of osteopathy, or clinical psychologist. 2) Recommend the student reduce their course load due to medical reasons.
3) Include the student's full name and date of birth.
4) Be dated and specify for which semester the RCL is being recommended. Students may only be approved for a medical RCL for a cumulative of 12 months per degree level.
If your health problems continue beyond one semester, you will need an additional RCL every semester.

For Official Use Only:

☐ **Approve** ☐ **Deny** **Date**_____ **Initial**_____

Revised 08/2018