



The below mentioned student has requested to be enrolled on a part-time basis. International Students are required by the Immigration Service to be enrolled on a full-time basis. Full-time status requires that a student be registered for a minimum number of credits per semester:

Undergraduate student: 12 credits
Graduate student: 6 to 9 credits (dependent upon program of study)

Current University procedures and CIS/SEVIS regulations require that a student’s faculty advisor or other school official verify the reason a student must be enrolled part-time. Permission to enroll part-time may only be granted on a per-semester basis and must be accompanied with an explanation for the request.

A student may not register part-time without permission from their school/college and the International Center. A student who registers part-time without authorization will be considered “out of student status” by the CIS and subject to the loss of all immigration benefits.

Please complete the following:

Student Name Last First ID Number
Degree Program / Major Expected Graduation Date
Semester Requested (may only be requested on a per-semester basis)

Reason for Part-time Status (please check the appropriate box)

- Illness or Medical Condition (attach confirmation from a medical authority explaining the medical circumstances that require part-time enrollment)
Improper Course Level (Please provide explanation in remarks)
Initial Difficulties with Reading Requirements (Please provide explanation in remarks)
Initial Difficulty with English Language (Please provide explanation in remarks)
Unfamiliarity with American Teaching Methods (Please provide explanation in remarks)
To Complete Course of Study at the End of Current Semester (list semester/year)
Continuation of Thesis or Recital (Please provide explanation in remarks)
Other (Please provide explanation in remarks)

Remarks (please respond or attach necessary documents)

Remarks section with horizontal lines for text entry.

Student Signature Date

Signature of Academic Advisor/Representative Date

Return this Form to: The International Center, GSU 327, 3rd floor

International Center Authorization: Authorized PT Not authorized PT semester

PDSO Signature Date