

International Center Reduced Course Load Request

You must meet with an International Student Advisor to have a reduced course load approved. If it requires a LifeMap Advisors signature in room E235, please acquire the signature as soon as possible.

A student who drops below a full course of study without the prior approval of the DSO will be considered out of status. 8 CFR 214.2(f)(6)(iii)

Student Name:	S	Student ID#		
Last Name	First Name			
Email:	Semester: ☐Fall 20		□Summer 20	
Address:				
Street	city	state	zip code	
Please check <u>one</u> reason: Note: 2, 3 & 4 are <u>Onl</u> y allowed for 1 st	semester students			
☐ Improper Course Level Placement (L	ifeMap Advisor signature required below	v)		
☐ Initial Difficulty with Reading Require	ements (one time authorization)			
☐Initial Difficulty with English Langua	ge (one time authorization)			
☐ Unfamiliarity with American Teachir	ng Methods (one time authorization)			
Student Signature:		Date:_		
TO BE COMPLETED BY LIFEMAP ADVIS	SOR:			
I recommend the above students requ	est for a reduced course load.			
Comments:				
LifeMap Advisor Signature:		Date:_		
TO BE COMPLETED BY THE INTERNATI	ONAL CENTER (Designated School Offici	ial):		

Approval Date:	DSO Signature:
Comments:	