

REDUCED COURSE LOAD

MICHIGAN STATE
UNIVERSITY

OFFICE FOR INTERNATIONAL STUDENTS AND SCHOLARS
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International students on F-1 or J-1 visas are required to maintain full-time enrollment during fall/spring semesters. If summer is first or final semester of the student, then student must be enrolled full-time. The Student and Exchange Visitor Program (SEVP) allow students who are unable to enroll full-time, to apply for Reduced Course Load (RCL). Failure to complete this form in a timely fashion, may result in termination of the student's immigration (SEVIS) record. **Termination of a SEVIS record is very serious and can have many negative consequences. It can end the student's ability to stay in or travel to the U.S. and attend school.**

THIS SECTION TO BE COMPLETED BY ACADEMIC OR GRADUATE ADVISOR

Academic advisors who are signing this form are **ONLY** confirming that they have met with the student and discussed academic consequences of being less than full-time. Academic advisors are not approving the RCL form but simply confirming the student was advised accordingly. OISS is responsible for adjudicating immigration related forms.

Student's Name:		Student's Expected Date of Completion:	
Name of Academic Advisor or Graduate Advisor:			
Department:	Title:	Email:	
Signature:	Date:	Phone:	

THIS SECTION TO BE COMPLETED BY STUDENT

Last Name:	First Name:	PID: A
Program Level: <input type="checkbox"/> Bachelors <input type="checkbox"/> Masters <input type="checkbox"/> Doctoral <input type="checkbox"/> ELC	Phone:	Date of Birth:
Semester of RCL: <input type="checkbox"/> Fall <input type="checkbox"/> Spring <input type="checkbox"/> Summer Year: _____	Enrolled number of Credits IF RCL is approved:	

IMPORTANT REMINDERS FOR STUDENTS (Check All)

- I understand that applying for RCL for the reasons of academic difficulties is only possible for **first semester of study ONLY**
- I understand that I **MUST** be enrolled for the minimum required when applying for RCL
- I understand that after this semester, I **MUST** enroll full-time each semester until **ALL** program requirements are completed.
- I understand, if applying for academic RCL, I must enroll for at least half of full-time required credits. (BA: 6, MA: 5, Ph.D.: 3 credits)
- I understand that I can only enroll in **ONE online course** to count towards my full-time required credits
- I understand that I am responsible for dropping/resigning my courses and I must work with the academic advisor to drop courses.
- I understand that if summer is my **first or final** semester AND I will not enroll full-time, I **MUST** complete this RCL form or enroll full-time.
- I understand that during my final semester, OISS will update my I-20 and will shorten the ending date of my I-20.
- I understand that I must complete my course of study by the program end date listed on my I-20.
- I understand that once this RCL is process by OISS, it cannot be changed.

Exceptions to the Full-course-of-study Requirement (Check ONLY ONE)

Academic Difficulties: (first semester of study only) (once per program level)

- 1. Initial difficulty with reading requirements (**first semester of study only**) (once per program level)
- 2. Initial difficulty with English language (**first semester of study only**) (once per program level)
- 3. Unfamiliar with American teaching methods (**first semester of study only**) (once per program level)
- 4. Improper course placement (**first semester of study only**) (once per program level)

Completion of Course of Study in Current Term:

- 5. **FINAL semester** exemption (You **must** complete all courses this semester). Student **must** enroll in a minimum number of credits required to graduate. The **I-20 end date will be shortened to reflect that student is completing the program.** _____ (initial): **I will not enroll for online courses ONLY. No on-campus employment or CPT after this date.**

Illness or Medical Condition

- 6. **Medical condition that prevents full-time study.** Student **must** obtain an official letter from a U.S. medical doctor or a board-certified psychologist stating the reason for a reduction in course load for health reasons to part-time study or zero credits. The letter must also detail the period of the RCL. A copy of the doctor/psychologist official letter **must** be on file with OISS. **Medical RCL can only be approved per semester for a total of 12 months.**

Student Signature:	Date:
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THIS SECTION TO BE COMPLETED BY OISS

Student to be full-time by:	Date:
<input type="checkbox"/> Approved by OISS	<input type="checkbox"/> Denied by OISS
Signature:	