REDUCED COURSE LOAD (RCL) – ACADEMIC DIFFICULTIES

All international students are required by U.S. Citizenship and Immigration Services (USCIS) to register for and complete a full course of study each academic term. Graduate students must complete a minimum of 9 credits and undergraduates must complete a minimum of 12 credits. Federal regulations do allow a one-time exception to full-time enrollment per degree level, based on documented academic difficulties. A reduced course load for academic difficulties may only be approved for the following reasons:

- Initial difficulties with the English language or reading requirements
- Unfamiliarity with American teaching methods
- Improper course level placement

During the term for which a student is authorized to a reduced course load, he or she must be enrolled for a minimum of 6 credits and must resume a full course of study beginning the next available term. Please note that a reduced course load CANNOT be approved for financial reasons, unavailability of a course, or an anticipated poor grade.

PART I (to be completed by the student)

Last name (family) ___________________________________ First name (given) ______________________________
Student ID ______________________  Phone ____________________  Email ________________________________

Current U.S. Address: Go to https://ipconnect.oregonstate.edu Click on Select biographical information, then Local U.S. Address E-Form. * You are required to report your address to SEVIS to maintain your immigration status.

Degree Level (circle)     Bachelor’s Master’s PhD     Major _________________________________
Term for which this form applies (circle)    Fall    Winter        Spring        Summer    20______________

I petition to have ______ credits (minimum of 6) accepted as equivalent to a full course of study for the following reasons:
____________________________________________________________________________________________
____________________________________________________________________________________________

Student’s signature ______________________________________________________  Date ____________________

PART II (this section must be completed by the academic advisor)

I recommend the student be exempted from a full course of study for the term listed above for the following reasons:
____________________________________________________________________________________________
____________________________________________________________________________________________
____________________________________________________________________________________________

Academic advisor’s signature _______________________________  Date ____________________

Name and title (please print) __________________________________________________________

Department __________________________  Phone ________________  E-mail _______________________________

Continued to Page 2

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PART III (to be completed ONLY by sponsored students only):

As a sponsored student, your sponsor requires you to maintain a certain minimum number of credits (typically 15 for undergraduates, 9 for graduates) and does not permit you to withdraw from courses after the 100% refund deadline in Week 1. Under the terms of agreement with your sponsor, OSU is obligated to notify your sponsor regarding your registration status, including reduced course loads, dropping courses, or withdrawing from the university. This may have adverse consequences on your sponsorship funding including a deduction of your stipend/salary or a discontinuation of your scholarship by your sponsor. If you are dropping any courses after Week 1 your sponsor may not cover the costs for tuition and fees for the courses which you drop or withdraw. Should this occur, **you will be required to pay any outstanding balances on your student account including tuition and fees normally covered by your sponsor.**

☐ I have read the above and understand that my sponsor will be notified of the change in my registration/enrollment status. I also understand that I am responsible for payment of any tuition and fees as well as outstanding balances on my account not paid by my sponsor due to this change.

Student’s signature _______________________________________________________ Date ____________________

Office of International Services use only

RCL – academic difficulties:  Approved  Denied  OIS initials ____________ Date RCL entered into SEVIS ________________