ALTERNATE ENROLLMENT REQUEST

All international students are required by the US Department of Homeland Security (DHS) to register for and complete a full course of study each academic term. Oregon State University defines a full course of study as:

- Graduate students: a minimum of 9 credits
- Undergraduate students: a minimum of 12 credits
- Pathway program students: a minimum of 12 credits
- Academic English students: a minimum of 18 credits

Federal regulations do allow the following exceptions to full-time enrollment per degree level:

- **Final Term**: Available to students only during their final term of a degree/program level.
- **Reduced Enrollment**: Masters or Doctoral students in thesis programs who have completed all required coursework and all credits listed on the Graduate Program of Study, including all coursework related to the student’s minor or other areas of concentration and all required thesis hours, projects and seminars are eligible for up to 4 terms (Masters) or 6 terms (Doctoral) of Reduced Enrollment. A minimum of 3 credits is required each term. Please include a copy of the Graduate School approved Program of Study.
- **Academic Difficulties**: Limited to one of the reasons listed on page 2 of this form. It can be used once per degree/program level. Students are required to register at least half time during term of approval. Students must meet in person with an academic advisor to discuss their situation prior to receiving a signature.

Please note that a reduced course load CANNOT be approved solely for financial reasons, unavailability of a course, or an anticipated poor grade. This completed form must be received by the Office of International Services before dropping below full-time.

Approval for a Reduced Course Load (RCL) or Reduced Enrollment (RE) does not result in the removal of the un-needed classes from a student’s schedule. Students are responsible for adjusting their schedule themselves in accordance with academic deadlines. An approved RCL or RE does not guarantee refund or deferral of fees paid or incurred.

**Sponsored Students ONLY**

I understand that I must obtain approval from my sponsor prior to reducing my course load and any financial or other sponsorship consequences are my responsibility. *Under the terms of our agreement with sponsors, OSU is required to provide enrollment information to sponsors.

Signature: _______________________________ Date: _______________________________

PART I for the Student

Name (First Last): ___________________________________________________________ Student ID: __________________________

Degree Level (circle): INTO OSU Bachelor’s Master’s PhD

Major: ______________________________  Second Major (if applicable): ______________________________

Term Alternate Enrollment Requested to Start (circle): Fall Winter Spring Summer 20 ______

Signature: ____________________________________________________________________ Date: __________________________

You are required to report your Current US Address, Phone, and Email to SEVIS to maintain your immigration status. Login to https://ipconnect.oregonstate.edu; select 'Biographical Information' & complete ‘Local US Address’ and ‘Contact Information’
PART II for Student’s Academic or INTO OSU Advisor

I recommend the student be exempt from a full course of study for the following reason (please select ONE option below):

☐ Final Term (choose one):
Your signature indicates that the student is on track to complete studies at the end of the term listed above.

☐ INTO OSU Student: (See Advisor for approval)  ______  # of Credits Remaining
☐ Undergraduate Student  ______  # of Credits Remaining
☐ Non-thesis Graduate Student (MBA, MEng, etc.)  ______  # of Credits Remaining

☐ Reduced Enrollment for Thesis Masters Programs (choose up to 4 terms):
Your signature below indicates that the student has an approved Program of Study on file with the Graduate School and has attached a copy of it with this form. The student has completed all required coursework and all credits listed on the Graduate Program of Study, including all coursework related to the student’s minor or other areas of concentration and all required thesis hours, projects, and seminars.

☐ Fall 20 ___  ☐ Winter 20 ___  ☐ Spring 20 ___  ☐ _____________20 ___  (Summer only required if final term)

☐ Reduced Enrollment for Dissertation Doctoral Programs (choose up to 6 terms):
Your signature below indicates that the student has an approved Program of Study on file with the Graduate School and has attached a copy of it with this form. The student has completed all required coursework and all credits listed on the Graduate Program of Study, including all coursework related to the student’s minor or other areas of concentration and all required thesis hours, projects, and seminars.

☐ Fall 20 ___  ☐ Winter 20 ___  ☐ Spring 20 ___  ☐ _____________20 ___  (Summer only required if final term)

☐ Fall 20 ___  ☐ Winter 20 ___  ☐ Spring 20 ___  ☐ _____________20 ___  (Summer only required if final term)

☐ Fall 20 ___  ☐ Winter 20 ___  ☐ Spring 20 ___  ☐ _____________20 ___  (Summer only required if final term)

☐ Academic Difficulties (choose one after meeting in person with the student to discuss their situation):
☐ Initial difficulties with English language requirements (1st year, Degree-seeking only)
☐ Initial difficulties with English reading requirements (1st year, Degree-seeking only)
☐ Unfamiliarity with American teaching methods (1st year, Degree-seeking only)
☐ Improper course level placement (Degree or INTO OSU)
☐ None of the above reasons are applicable. (Note that in this case an “Academic Difficulty” RCL cannot be approved.)

Additional Comments: _________________________________________________________
__________________________________________________________________________
________________________________________

Program:

________________________________________

Academic or INTO OSU Advisor’s Signature: ___________________________ Date: _____________________________

Name and title (please print): __________________________________________ Phone ___________________________

INTO OSU Finance Signature: ___________________________ Date: _____________________________

Degree Students with Second Majors (if applicable, a signature from the second major advisor is needed as well)

________________________________________

Academic Advisor’s Signature: ___________________________ Date: _____________________________

Name and title (please print): __________________________________________ Phone ___________________________