

## F-1 Academic Reduced Course Load Request

Federal regulations permit a Designated School Official (DSO) to authorize a reduced course load in the first semester due to unfamiliarity with U.S. teaching methods, difficulty with reading requirements, improper course level placement or difficulty with the English language. Complete this form with your academic advisor or course instructor.

## STUDENT:

Last Name:	First Name:	UID:	
Email:	Phone Number:		
Student's Signature:		Date:	
authorization from a DSO. If you o will be terminated for unauthorized	drop below a full course of study reduced course load.	ourse Load. Do NOT drop any courses without prior without prior DSO authorization, your SEVIS record	
ACADEMIC ADVISOR:			
I certify that the above student req following academic reason:	uires a reduced course load for the	esemester because of the	
Unfamiliarity with U.S. teachin	g method		
Initial difficulty with reading rec	uirements		
Improper course level placem	ent		
Initial difficulty with English language			
Note: The student may only be g semester.	ranted a reduced course load du	e to the above academic reasons during their first	
How many hours should the stude	it take after the reduced course lo	ad (must be at least six (6) credits)?	
Comments (Please state which cou	irses the student plans on droppin	g and any other relevant information):	
Advisor Name:		Phone Number:	
Advisor's Signature:		Date:	
		d or voluntary supplemental documentation.	
DESIGNATED SCHOOL OFFICIA	L:		
Approval for the above action gran	ted by (printed name of DSO):		
DSO's Signature:		Date:	