

REDUCED COURSE LOAD

F-1 and J-1 students must enroll as full-time students during every quarter of their program of study at UCSB. In order to drop below full-time enrollment, international students must receive prior authorization from OISS. This is done through requesting a reduced course load. **Authorization is not automatic and not every student is eligible for a reduced course load.**

REASONS FOR REDUCED COURSE LOAD REQUEST

- It is your final quarter to graduate with your Bachelor's Degree (undergraduate students).
- You are finishing your final coursework before your thesis/exams or it is your final quarter (graduate students).
- You have a valid medical reason for taking less than 12 units (medical statement required)
- You are having initial difficulties with the English language and/or with reading requirements
- You are experiencing unfamiliarity with American teaching methods
- You have been improperly placed in a course level that is too high

Please note the following:

- Students must already be enrolled full-time prior to submitting their request.
- Students requesting a Reduced Course Load must still be enrolled in at least 6 units, unless:
 - Fewer than 6 units are required to complete your program
 - You have a valid medical reason for taking less than 6 units
- A reduced course load for academic reasons may only be approved once during your academic program.
- Medical statements must be in English from a licensed physician or psychologist. OISS will not accept statements from chiropractors or acupuncturists.
- Getting a bad grade in a course does not make you eligible for a reduced course load. You may want to explore the Pass/Not Pass grading option when you are uncertain how well you will do in a class or when you do not want a class to count toward your GPA.

APPLICATION PROCESS

1. Meet with your department/college advisor to determine your eligibility for a reduced course load and the possible impact of part-time enrollment on your program of study.
2. Complete and obtain the advisor's signature on the Reduced Course Load Request Form.
3. Come to OISS during walk-in advising hours or schedule an appointment to meet with an International Student Advisor to discuss your request.
4. Submit your form to the International Student Advisor for review.

APPROVAL OF REDUCED COURSE LOAD

If your request is approved, you will receive your Reduced Course Load Request Form back, complete with an International Student Advisor's signature to indicate that it was approved. You should keep the approved form with your records as proof that you were authorized to drop below full-time enrollment. You may then log into GOLD and drop the appropriate course(s).

REDUCED COURSE LOAD REQUEST FORM

F-1 and J-1 students must enroll as full-time students during every quarter of their program of study at UCSB. However, international students at UCSB are eligible to apply for a reduced course load under certain circumstances. To receive approval, students must first complete this form and meet with their academic/department advisor and an International Student Advisor. Eligibility is limited and is not guaranteed. **Students who drop below 12 units without prior authorization from OISS may have immigration problems.**

STUDENT INFORMATION

Name: _____ | _____ | _____
Family/Primary Name First/Given Name Middle Name

SEVIS ID: _____ PERM #: _____

Phone: _____ Email: _____

Level of Study: Doctorate Master Bachelor Non-Degree (EAP)

Quarter for Reduced Course Load: Fall Winter Spring Year: _____

Number of Units You Will Have After Dropping: _____ Expected Completion Date: _____

REASON FOR REDUCED COURSE REQUEST (Check one of the following):

<p>Initial difficulties with the English language and/or with reading requirements</p> <ul style="list-style-type: none"> • Advisor signature required below. • Must still be enrolled in at least 6 units. 	<p>Withdrawal from a course due to improper course level placement</p> <ul style="list-style-type: none"> • Advisor signature required below. • Must still be enrolled in at least 6 units. 	<p>Final quarter for undergraduates to graduate with Bachelor's Degree</p> <ul style="list-style-type: none"> • College Advisor signature required below.
<p>Unfamiliarity with American teaching methods</p> <ul style="list-style-type: none"> • Advisor signature required below. • Must still be enrolled in at least 6 units. 	<p>Medical reason</p> <ul style="list-style-type: none"> • Attach written statement from physician/psychologist. Must be in English. We will not accept chiropractic doctor or acupuncturist's notes. 	<p>Graduate student's final coursework before thesis/exams or final quarter</p> <ul style="list-style-type: none"> • Department Advisor signature required below; OR • If paying a filing fee, attach copy of approved Leave of Absence petition.

Explanation (Required)

Student Certification (Required)

This is to certify that I am instructing the UCSB Office of International Students & Scholars to update my SEVIS record to reflect authorized part-time study for the reason indicated above.

FOR ACADEMIC REASONS: I understand that I am allowed to study part-time (less than 12 units) for one term at this level of study and that I must remain enrolled in at least 6 units after being approved. For the rest of my program of study at UCSB, I acknowledge that I am **required** to enroll in a full-time course load the following quarter and each quarter until I graduate.

FOR MEDICAL REASONS: I understand that I am allowed to study part-time (less than 12 units) for a total of 12 months due to illness or medical condition at this level of study. I will enroll in a full-time course load the following quarter, unless I am authorized to continue a reduced course load for medical reasons. I understand this must be reviewed and authorized on a quarter-by-quarter basis.

Student Signature: _____ Date: _____

ADVISOR AUTHORIZATION

I am aware of the circumstances above and have discussed the impact of a reduced course load for the above-named student.

Comments _____

Academic/Department Advisor Name: _____ Title: _____

Academic/Department Advisor Signature: _____ Date: _____

OFFICE OF INTERNATIONAL STUDENTS & SCHOLARS AUTHORIZATION

Approved Denied DSO Signature: _____ Date: _____