

Reduced Enrollment Request Form

This Section is to be Completed by the Student

Date: _____ Student ID: _____ Semester & Year: _____

Name: _____

The U.S. Citizenship & Immigration Services (USCIS) regulations require international students to be registered full-time every semester. Keck Graduate Institute has determined full-time status to be 12 units (10.5 for Ph.D. students); all international students must enroll full-time unless authorized to drop below by their program’s Faculty Advisor/Assistant Dean/Dean, Registrar’s Office and OISS.

This Section is to be Completed by Program Representative

Students may drop below a full-time course load for only one of the following reasons. Please note that, with the exception of medical, the reasons can only be used for students new to the US in their **first** semester at KGI. If you are unsure of which category to choose, please contact the International Office.

Student will be taking _____ units. Reasons for taking less than a minimum course load:

- Improper course placement or sequence (program should take steps to remedy this by following term)
- Initial difficulties with English language **or** reading requirements **or** unfamiliarity with American teaching methods (these can only be used for students new to the US in their **first** semester at KGI)
- To complete course of study in current term (no additional units needed to graduate)
- Medical Illness (page 2 must be completed by licensed medical doctor, doctor of osteopathy, or licensed clinical psychologist. No other notes can be accepted.)

Program Representative Name	Program Representative Signature	Date
Registrar Staff Name	Registrar Staff Signature	Date
Student Signature	Date	

Waiver of Full Course of Study Requirement: Illness or Medical Conditions

in accordance with 8 C.F.R. § 214.2(f)(5)(iv)

Federal regulations pertaining to the enrollment of F-1 students in the U.S. require that a student be registered for and complete a full course of study per term (12 credit hours). Exceptions to the fulltime enrollment requirement are limited by regulations and include medical incapacity. In order to authorize a reduced course load based upon a medical condition, the student must provide current medical documentation from a licensed medical doctor, doctor of osteopathy, or licensed clinical psychologist to substantiate the illness or medical condition. The student must gain new authorization for a drop below full course of study each semester. A student previously authorized to drop below a full course of study due to illness or medical condition for an aggregate of 12 months may not be authorized to reduce course load again while pursuing a course of study at the same program level.

To Be Completed by KGI Student:

I am unable to enroll full-time due to an illness or medical condition. I request a waiver from the full-time enrollment requirement. The illness or medical condition that makes it difficult or impossible for me to attend classes full-time is described by my physician in the provided documentation.

Student Name: _____ KGI ID number: _____

Student's Signature: _____

Take this form to your physician for completion or attach your physician's note. If the section below is completed, attach physician's business card to this form. If you are attaching a physician's note in place of having your care provider complete this form, please ensure that the physician makes a recommendation as to whether you should take a reduced course load or should take no classes at all.

To the Physician/Licensed Clinical Psychologist:

This student has stated that he/she is not able to attend full-time academic courses due to an illness or medical condition. Federal regulations require that the reasons be documented. Please briefly describe the student's illness or medical condition that hinders school attendance. Please specify whether the student is able to take a reduced course load, indicating proper unit load, or should take no classes at all. Note that pregnancy, in itself, is not considered debilitating and may not be used to excuse attendance, but complications may be. This letter will be used as evidence for an exception to federal immigration policy and go on file with the Department of Homeland Security.

Due to the explanation above, I, _____, recommend that the student enroll below full course load for the period of time listed above.

Signature License # (or attach documentation) Date