Request for Authorization of Reduced Course Load at UAH

F-1 international students are required by federal law to enroll and complete a full course of study each semester (12 hours for undergraduates and 9 hours for graduate students). Please complete this form and return it to CTC 116 to request a reduction in course load. *NOTE: This form must be completed and*

signed BEFORE a student registers for less than full time or withdraws from any class that will result in less than full time enrollment. Failure to do so will result in the student falling "out of status" <u>Submission of this</u> form does not guarantee approval of the student's request.

SECTION I (To be completed b	v the Student)	
Name	Stude	nt ID# A
(Last/Family)	(First/Given) (Middle)	
Telephone	Email Address	
Program: □ Bachelor's □ Master's		
` -	by the student's Academic Advisor or Dep	
Student will enroll in	hours at UAH this semester and plans to gr	
Reduced course load is requested		_based on the following:
	ch a signed and dated letter from a licensed	
	nd recommendation. NOTE: Reduction/Win	
	and documented every semester. A maxim	um of 12 months may be
	course load based on medical condition.	
	l coursework and is registered for Comprehe	
	aduate this semester—Attach copy of gradu	ation application and current, updated
Program of Study.		
	er at UAH and is having difficulty with the I	
	assessing the difficulty and the recommend	
	ım of six hours and must resume full cour	
	SL classes this semester to overcome the d	leficiency. Only one reduction due to
	be authorized during a program level.	
 Student is in first semester at UAH and is having academic difficulties due to American teaching methods, 		
	improper course level placement—Attach le	
	dvisor detailing the situation. NOTE: Stude	
minimum of six hours a	and must resume a full course of study the	next semester. Only one reduction
	lty can be authorized during a program le	
This request for authorization for	or less than full time enrollment is for the	semester indicated above and is for
one semester only. Approval of	this particular request in no way grants a	pproval for part time enrollment
during previous semesters or fu	ture semesters at UAH.	
Advisor's Signature	Advisor's Printed Name	Date
-		
Department Chair's Signature	Department Chair's Printed Name	Date
	1	
International Student Advisor	Date	
**Please contact an Internationa	l Student or Scholar Advisor at 256-824-6	055 or isss@uah.edu for assistance