EXCEPTION TO FULL-TIME COURSE LOAD REQUIREMENT

TO BE COMPLETED BY STUDENT:

NAME: _________________________________________________ IPFW ID#: ______________________________
DEGREE/MAJOR: ________________ I-20 EXPIRATION: ____________ EXPECTED GRAD DATE: ______________

MINIMUM REQUIRED COURSE LOAD PER SEMESTER FOR INTERNATIONAL STUDENTS AS REQUIRED BY THE US DEPARTMENT OF HOMELAND SECURITY:

- Bachelor’s - 12 credit hours
- Master’s - 9 credit hours (no assistantship)
- Master’s - 6 credit hours (with assistantship)

☐ I hereby petition to have a total of _____ credits accepted as the equivalent to a full course of study.
☐ I hereby petition to drop _____ credit hours, leaving a total of _____.

I am aware that insufficient funds are NOT considered a valid reason to carry less than a full course of study. I am requesting approval of this exception based on the following circumstances (attach additional documentation, if necessary):
__________________________________________________________________________________________________

SIGNATURE OF STUDENT: _________________________________________________ DATE: __________________

TO BE COMPLETED BY:

ACADEMIC/FACULTY ADVISOR, THESIS ADVISOR, or GRADUATE PROGRAM COORDINATOR:

I certify that the circumstances described by the above-named student are correct. I recommend that he/she be exempt from the full course of study requirement for __________ semester, 20____, and continues to make normal progress toward his/her degree. Justification is indicated below:

☐ The student has been advised to carry fewer credits due to English proficiency difficulties.
☐ The student is unfamiliar with American teaching methods or reading requirements.
☐ Improper course level placement. (Attach explanation)
☐ The student is registered for required/recommended off campus internship credit (additional CPT authorization form required)
☐ The student has been approved for a graduate teaching, graduate research, or graduate administrative assistantship (Attach documentation)
☐ The student has a documented medical condition necessitating fewer hours. (Attach documentation)
☐ The student will graduate at the end of the semester and needs only _____ hours to complete degree requirements.
☐ Other: Please attach explanation and any pertinent documentation

APPROVED: (Please contact the Director of International Education directly if approval is not recommended)

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<th>Signature, Academic Advisor:</th>
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<td>Signature, International Student Services</td>
<td>Date:</td>
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Please return completed form to Office of International Education (OIE), Walb Student Union Rm. 145