Reduced Courseload Request Form - UNDERGRADUATE

This form must be submitted to IA (Copper House 9202) or emailed to IA at international@uccs.edu, before the end of the add/drop period of the semester to which it applies or prior to dropping any class throughout the semester that would place you below the normal full-time enrollment requirements (12 credits for undergraduates). Undergraduate students are also required to follow the online course limit, which is maximum one course to be online each fall and spring in the full-time load. If approved for a reduced course load, students MUST have at least one in-person class in order to maintain their status. Students cannot take only online classes in their final semester. Submitting this form does not guarantee approval for a reduced course load. Please wait for approval confirmation from your International Student Advisor before dropping any class. Additional documentation may be required depending upon the reason. not

Section A: To Be Completed by Student	
Name:(Last/Family Name) (First/Given Name)	UCCS ID number:
Education Level: Bachelor's	Immigration Type: F-1 J-1
Semester/Year Requested:	Proposed Number of Credits:
reasons that an international student may be enrewhich course(s) the student is authorized to drop	c Advisor lest for a reduced course load. The reasons below are authorizable olled part-time, according to the F-1 and J-1 regulations. Please indicate /withdraw from, if applicable. Forward signed/completed form to one of the reasons below apply, do not sign this form. Call the IA office at
 ☐ Initial unfamiliarity with American teaching model ☐ Improper course level placement (available of land) ☐ In final semester of degree program and enrowant (available only once per program) 	only once per program) olled for number of credits necessary to graduate.
 Illness or Medical Reason (Student must sub psychologist detailing medical reason and re 	omit letter from a U.Slicensed doctor (M.D. or D.O.) or clinical commendation for a reduced course load)
Course(s) that student is authorized to drop/without	draw:
Additional Comments:	
Academic Advisor, Name:	Signature:
Phone:	Date: