Reduced Course Load Form

In general, permission to register for less than full-time should occur rarely during a student’s academic career. Per immigration law, international students must be full-time each Fall and Spring semester. **Full time status is 12 credits for undergraduate students.**

Therefore, if the student needs to fall below full-time registration for any reason, this form is to be endorsed by the Academic Advisor. The student must then take the form to the Global Education Center for endorsement. The student may drop the necessary class(es) after turning in the form to GEC.

*Please note:*
- One online class can count towards full time for F-1 students per semester.

This form has three sections:
- Section A (page 1) to be completed by the student.
- Section B (page 2) to be completed by the academic advisor.
- Section C (page 3) to be completed by Global Education Coordinator.

**Section A – To Be Completed by the Student:**

Name: _____________________________________ WCTC ID#: _______________________
Telephone #: ( _ _ _ ) _ _ _ - _ _ _ _  Email Address: ________________________________
Local Address: _________________________________________________________________
Major: ________________________________
Credits Accumulated: _______  Anticipated Graduation Date: ___________________________
Semester Requesting Less Than Full-Time Enrollment: SP 20___  FA 20___
Intended Number of Credits for Registration: _________
Section B – To Be Completed by the Student’s Academic Advisor:

Please check one of the following reasons for the student’s reduced course load. The reasons listed are the only valid and legal reasons an international student can drop below full-time. If you do not feel that the student’s circumstances meet one of these requirements, do not sign this form. Any questions should be addressed to GEC.

____ The student needs less than a full course load to complete the degree program at the end of this term.

____ The student has a medical/psychological reason to be registered less than full-time. The student must provide medical documentation from a licensed medical doctor, doctor of osteopathy, or licensed clinical psychologist. (Approval can be for “0 credits.” Can only be used twice; student must reapply for 2nd semester).

____ The student has been placed in an improper course level for his/her current academic standing. (Can only be used once; student must register for at least 6 credits).

____ The student is having initial difficulty with (select one):
   ___ English language
   ___ Reading requirements
   ___ American teaching methods

(For first-year students only; Student must register for at least 6 credits).

I endorse and recommend a reduced course load for the semester requested for this student as indicated. This request for permission to register for less than full-time is based on the reason checked above.

Academic Advisor, Signature: ________________________________

Print Name: ________________________________________________

Extension: _________  Date: _______________________

Section C – To Be Completed by Global Education Coordinator:

Signature _____________________________  Date: ______________________

Global Education Coordinator

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