Deviation from Full Course of Study Request Form

Based on federal statue {8C.F.R 214.2 (f)(6)}, international students are required to enroll in a full course of study during the academic year (Fall and Spring semesters). Full-time study is 9 credit hours for graduate students and 12 credit hours for undergraduate students.

In certain circumstances, international students can get permission to study less than full time. Students may request this permission by having the appropriate person complete the section that applies to their situation. There are three sections (I, II, III), but students will need only one of the sections completed. Reduced course loads are not available because of financial need or to protect a GPA.

Section A: To be completed by the student:

Family Name:	First Name:	First Name:		
PSU ID:	Email:	Email:		
Phone:	Today's Date:			
Current Address:				
(Street Add	ress)	(Apt. Number)		
(City)	(State)	(Zip Code)		
Section B: Have the appropriate	person complete the section that applies to ye	our situation. Complete only section I, II, or III.		
I. To Be Completed by Degree	Checking or Graduate & Continuing Stud	<u>lies:</u>		
\Box The student is in the final set	nester and is enrolled in the number of credit	hours needed to graduate.		
□ Fall 20	□ Spring 20			
Name (typed or printed):		Date:		
Signature:		Extension:		
Email:				
	<u>culty Advisor:</u> (Continued on back) ned above be allowed to take a reduced cours	se load for the following semester:		
□ Fall 20 □ S ₁		C		
	e load is: finished coursework and is in one of the follo s required for students in this situation.)	owing situations:		
	rehensive exams as a graduate assistant that is required for the a for a thesis or dissertation	ir degree		
	cement (Please provide a brief description be e 6 credit hours and graduates 5 credit hours			
	with one or more of the following (Please pro e 6 credit hours and graduates 5 credit hours a			
initial difficulties winitial difficulties w	ith the English language (first semester only) ith reading requirements (first semester only) ith American teaching methods (first semester) er only)		
	:			
Advisor Signature:		Dept:		

Extension:	_ Email:		_
Description of circumst	ances that require a reduced o	course load.	
	by Medical Doctor: (Please ch e attach a note or description on		and add a date, period of time, or "the end of the
☐ The above-referenced	l student is under my care for a	medical condition or compli	cation, and I recommend that the student take a
reduced course load	until/for		·
☐ The above-referenced	d student is under my care for a	medical condition or complia	cation, and I recommend that the student take no
classes until/for			·
Doctor Name (typed or p	printed):		
Doctor Signature:			Date:
Review by Internationa	l Programs & Services Office:	<u>.</u>	
I have reviewed the stude	ent's request for deviation from	full course of study and appr	rove the request.
Signature:			Date:
: Deviation Ent	ered in PSU Secure Shell	Date:	
: Deviation Ente	red in SEVIS	Date:	
I have reviewed the stude	ent's request for deviation from	full course of study and do n	tot approve the request. Explanation below.
Signature:			Date:
<u> </u>			

Pittsburg State University ~ International Programs & Services Office ~ 118 Whitesitt Hall ~ 1701 S. Broadway ~ Phone: 620-235-4680 ~ Fax: 620-235-4962