



**Undergraduate Students:** Please complete sections I, II, & III. Be sure to bring an unofficial copy of your CSUCI transcript with you when you meet with an advisor at the Advising Center in the Bell Tower Room 1595.

**Graduate Students:** Please complete sections I & II only.

**A reduced course load for academic reasons must consist of at least 6 units (for undergraduates) or 4 units (for graduates) per Immigration Service regulations.** If the request for a reduced course load is approved, the student must resume a full course of study during the next available Fall/Spring Semester in order to maintain legal student status, unless s/he is graduating or working on thesis. A student previously authorized to drop below a full course of study due to "Academic Difficulty" **will not be eligible** for a second reduced course load authorization due to "Academic Difficulty" while pursuing a course of study at the same academic level.

**A reduced course load or withdrawal from CSUCI due to a medical condition cannot exceed a total of more than 12 months.** A separate request form must be completed each semester, if more than one semester of reduced course load or withdrawal is needed.

In order for the Center for International Affairs to approve your request, you must provide current medical documentation from a licensed medical doctor, doctor of osteopathy, or licensed clinical psychologist that substantiates your illness or medical condition, and which recommends a reduced course load or a withdrawal from the university. Please attach an original letter from your doctor (on the doctor's original letterhead stationary) to this form. If you cannot submit the required documentation, or if the documentation does not include the required information, your request **cannot be processed.**

If your request is approved, you must resume a full course of study in the next available Fall/Spring Semester in order to maintain your legal student status.

**For Undergraduate Students Only**

**III. TO BE COMPLETED BY AN ACADEMIC ADVISOR IN THE ADVISING CENTER, BELL TOWER ROOM 1595**

I certify that the student named above is enrolled in his/her final units needed for degree completion and that s/he will meet all GENERAL EDUCATION and other university graduation requirements (outside of the student's major field of study) for graduation at the conclusion of the semester indicated above.

Advisor's Signature

Name and Title (please print clearly)

Department (please print clearly)

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Telephone

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**TO BE COMPLETED BY the Center for International Affairs**

Approved  Denied  Date Student Notified by E-Mail:

CIA Action:

CIA Advisor's Initials:

Date Entered into SEVIS:

**PLEASE RETURN THIS FORM TO  
CENTER FOR INTERNATIONAL AFFAIRS (CIA), SAGE HALL 2119**