

Under-enrollment Request Form

Non-thesis graduate and undergraduate

International Student and Scholar Services
Georgia State University
P.O. Box 3987
Atlanta, GA 30302-3987
Tel: 404-413-2070
Fax: 404-413-2072
Email: iss@gsu.edu
www.gsu.edu/iss



STUDENTS: Complete Section 1 and then have an *academic advisor* complete Section 2. After your academic advisor has completed section 2, you must meet with an international student advisor.

*****If you are requesting a reduced course load for MEDICAL reasons or because it is your FIRST TERM in school in the United States, please see an ISSS advisor for information.*****

1. To be completed by student

Family name _____ First name _____

Student # _____

E-mail Address _____@student.gsu.edu Telephone # (____) _____

College _____ Department _____

Degree: B.S./B.A. _____ Master _____ Ph.D. _____

Completion date on I-20 _____

2. To be completed by Academic Advisor

In general, permission to register for less than full-time should occur rarely in a student's career. According to immigration regulations the foreign student (F-1, J-1) should be full-time during each fall and spring semester.

*****PLEASE NOTE- regulations require approval from the International Advisor for taking less than a full course load prior to the start of classes in the corresponding academic term or the student will fall out of status*****

Through advisement by a GSU official, the student has been placed in the improper course level.

This semester is the student's last semester and the student needs less than a full course load to complete degree **and the course(s) are ones that are required to complete the degree.**

I endorse and recommend less than full-time registration for this student during
(FALL / SPRING) _____(year) semester.
Circle one

Final term for completion of the student's degree program: _____

Academic Advisor _____ Name _____ Date _____
Signature

Email Address _____ Phone # _____

Please return to the Advisor in Int'l Student & Scholar Services in a sealed, departmental envelope.

3. To be completed by the Foreign Student Advisor

Approved by Foreign Student Advisor: _____ Date _____