

# Morehead State University

## International Student Services

### Academic Advisor's Recommendation For Reduced Course Load

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Student Name: \_\_\_\_\_

Date USCIS expects this student to complete studies: \_\_\_\_\_; \_\_\_\_\_; \_\_\_\_\_ (MM/DD/YY)

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*Academic advisor:* This form is provided to facilitate the communication of certain information required by regulations of the U.S. Citizenship and Immigration Services (USCIS). Its completion is needed for a student in F-1 status to be granted a reduced course load. Any questions you may have can be directed to Mr. Clive Liew at 783-2096 or [c.liew@moreheadstate.edu](mailto:c.liew@moreheadstate.edu). Thank you for your assistance.

1. Has this student been continuously enrolled for a full course of study?       Yes     No
2. This student will complete requirements for his/her current program with a reduced course load for the specific semester starting: \_\_\_\_\_ (MM/DD/YY)
3. It is recommended that this student be enrolled in less than full-time because: (please check all of the following that applies).
  - This is the student's last semester and requires only \_\_\_\_\_ credit hours for graduation.
  - Medical Reasons - Documentation from a Physician is required.
  - Language difficulty (must be the student's first semester at MSU).

4. It is recommended that the student be enrolled in the following courses.

Dept.	Course No.	Section No.	Sem. Hrs.	Instructor

I therefore recommend that this student be allowed to be enrolled in less than a full course load.

Academic Advisor's signature: \_\_\_\_\_

Academic Advisor's printed name: \_\_\_\_\_

Department: \_\_\_\_\_ Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ (MM/DD/YY)

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*For office use only:*

Date received from the advisor: \_\_\_\_\_; \_\_\_\_\_ (MM/DD/YY)

Comments: