

International Studies and Programs

Reduced Course Load Recommendation Letter for Academic Reason

To be used by UNO International Students

Summary of the Regulation: International students who are in the US in F-1 or J-1 status are **required by law** to pursue a full course of study every semester of the academic year. "Full-time student status" is defined as 12 credit hours for undergraduates and 9 credit hours for graduates. The **United States Citizenship and Immigration Services (USCIS)** limits the reasons for a student to engage in less than full-time enrollment to the ones listed on this form. Failure to

comply with this law may result in the student's or scholar's SEVIS record being terminated.

Steps for the Student:

Step 1: Contact your **academic advisor**, **department chair**, **or professor** who may make a recommendation for a reduced course load if appropriate for your situation.

Step 2: Contact an **International Student Advisor** who will review the recommendation and decide whether or not to approve your reduced course load.

Step 3: After your international student advisor signs the reduced course load form, you may withdraw from the approved class/es. Students with a reduced course load for initial academic difficulty may drop only one class below full-time.

Name of Student:	NU ID Numb	oer:	
Academic Term for Academic Reduced Course Load:			
 undergraduate, graduate, and do English d Unfamilia Unfamilia Improper (Note: Authorization for less that second semester of each academ The student needs less than a full must graduate this semester.) The student has completed formation 	demic difficulties due to: (once per academic octorate levels) lifficulties, arity with reading requirements, arity with American teaching methods, or course level placement. an full-time for initial academic difficulties nic level. The student must resume a full cour course load to complete the program in the cour cl course work and is engaged in thesis, disser . To the anticipated date of completion.	is normally limited to the first or rse of study the next semester.) current academic term. (Student	
I recommend less than full-time enrollment for this student during the semester requested.			
Name of Academic Advisor, Department Chair	r, or Professor and Title UNO College	Phone Number	
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ApprovedNot Approved	gnature of International Student Advisor	Date	



International Studies and Programs

Reduced Course Load Recommendation Letter for Medical Reason Physician's Statement

To be used for ILUNO and UNO International Students

Summary of the Regulation: International students who are in the US in F-1 or J-1 status are required by law to pursue a full course of study every semester of the academic year. `Full-time student status_ is defined as follows: 12 credit hours for undergraduates, 9 credit hours for graduates, and 21 hours of classes per week for Intensive Language at UNO (ILUNO) students. The United States Citizenship and Immigration Services (USCIS) provides guidelines regarding less than full-time enrollment or no enrollment for a medical reason. A recommendation must be given by a licensed medical doctor, doctor of osteopathy, or

licensed clinical psych ologist. A reduced course load or no course load for a medical reason may not be approved for more than 12 months per academic program and must be reviewed for each UNO semester or ILUNO session. Failure to comply with this law may result in the student's or scholar's SEVIS record being terminated.

Steps for the Student:

Step 1: Contact your licensed medical doctor, doctor of osteopathy, or licensed clinical

psychologist who may make a recommendation for a reduced course load or no course load if appropriate for your health and medical circumstances.

Step 2: Contact an **International Student A dvisor** who will review the recommendation and decide whether or not to approve your reduced course load. If you are physically unable to come to the office, you may call or give someone written permission to contact us on your behalf. **Step 3**: A fter your international student advisor signs the reduced course load form, you may withdraw from the approved class/es.

Name of Student: _____ NU ID Number: _____

As a **licensed medical doctor, doctor of osteopathy, or licensed clinical psychologist** who knows the health circumstances of the above student who has been under my care, I recommend that this student be allowed to take _____ credit hours (UNO student) or _____ class hours (ILUNO student) per week due to a medical reason. I further recommend that this reduced course load for medical reason begin on ______ and continue through the end of the current UNO semester or ILUNO 8-week session.

Name of Medical Doctor, Doctor of Osteopathy, or Licensed Clinical Psychologist	Hospital or Clinic Name	Phone Number

Signature of Medical Doctor, Doctor of Osteopathy, or Licensed Clinical Psychologist

Date

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Signature of International Student Advisor