

UNIVERSITY of HOUSTON | ISSSO

302 Student Service Center 1 Houston, TX 77204-3024 ☎ Phone: (713) 743-5065 ☎ Fax: (713) 743-5079 🌐 <http://isso.uh.edu>

Reduced Course Load (RCL) for Graduate Students

F-1 students are required to maintain full-time student status every semester they are in the United States. Graduate students need to complete a minimum of 9 hours to maintain their immigration status. Students may have additional hours that are academically required by their department or are required for a tuition waiver. Classes during the summer are optional unless your initial admission to UH is for the summer. Then you must complete 6 hours (i.e. full-time for summer). The following form must be completed before reducing your course load (RCL) below full-time hours.

There are 3 categories of RCL:

1. For valid academic difficulties (allowed only in one semester during an entire degree program)
2. Medical excuse (allowed for a maximum of 1 year during an entire degree program)
3. Final semester (If you fail to graduate, you may need to apply for reinstatement).

Note: Reduced course load may involve the loss of resident tuition and DSTF.

I am applying for a reduced course load for the: <input type="checkbox"/> fall semester or <input type="checkbox"/> spring semester of 20__.			
I want to drop the following classes: _____; _____; _____ (course number)			
After the drop, I will have a total of ____ hours for the: <input type="checkbox"/> Fall semester 20__.			
<input type="checkbox"/> Spring semester of 20__.			
Please check one of the reasons listed below for why you want a RCL. After the 1st day of the semester, student must submit a copy of this completed form to Record and Registration office (located in the Welcome Center) to request the drop.			
Student's Name _____	Signature _____	PeopleSoft # _____	Date _____
Student's Name _____	PeopleSoft # _____	Date _____	

1. RCL FOR VALID ACADEMIC REASONS

RCL for valid academic reasons is allowed for only one semester during an entire degree program and requires that you still complete at least 6 hours of course credit.

- I am having initial difficulties with the English language, reading requirements or due to unfamiliarity with American teaching methods.
- I am having difficulty with my class(es) due to improper course level placement which may include not having the prerequisites for a course, or insufficient background or experience to complete the course at this time.

2. RCL FOR MEDICAL REASONS

Valid medical reason must be proven with a supporting letter that states the nature of the medical condition, the reason for a reduced course load, and how many hours can be taken for the semester. Medical excuses must be renewed each semester. You are only allowed to accumulate one year of reduced course load for medical reasons during any given degree program. **Note: Zero hours are allowed under this provision of the law if clearly stated by the medical professional.**

- Letter from medical doctor is attached.
- Letter from a doctor of osteopathy is attached.
- Letter from a clinical psychologist is attached.

3. RCL OR FULL-TIME EQUIVALENCY FOR FINAL SEMESTER (Select one)

- Reduced Course Load for Non-Thesis Track:** This is my expected final semester and I only need ____ hours of course work to complete my degree program. I understand that if I am granted a reduced course load and fail to complete my degree as planned, I may be in violation of my legal status and may need to apply for reinstatement. (If you need only one course to finish your program of study, it cannot be taken through online/distance education).
- Full-time Equivalency for Thesis Track:** I am expecting this semester to be my final semester. I have completed all course work and I am only working on my thesis or dissertation. I am allowed to take only ____ hours of thesis or dissertation for fall semester spring semester of 20__. This option will classify you as having full-time equivalency for SEVIS reporting. If I fail to complete my thesis/dissertation I will be required to take 9 hours in subsequent semesters.

Academic Certifying Signatures			
Academic Approval: I approve of this application for a reduced course load.			
<input type="checkbox"/> Approved	Academic Advisor:	Date:	Comments:
<input type="checkbox"/> Not approved	Signature:		
<input type="checkbox"/> Approved	Chair:	Date:	
<input type="checkbox"/> Not approved	Signature:		
<input type="checkbox"/> Approved	Dean:	Date:	
<input type="checkbox"/> Not approved	Signature:		
<input type="checkbox"/> Approved	GPS Dean:	Date:	
<input type="checkbox"/> Not approved	Signature:		

APPROVAL SIGNATURE FROM ISSSO

Name _____ Signature _____ Date _____