Western Oregon UNIVERSITY

Reduced Course Load (Initial English/Academic Issues)

International students are allowed to register for less than a full course load (undergraduate: 12 credits, graduate: 9 credits) if they (a) have initial difficulties with English during the first term of their degree program, or (b) have difficulties with reading requirements, or (c) have difficulties with American teaching methods, or (d) were improperly placed in a high-level course. **Students must take at least half of a full course load.** *Regulation Source: 8 C.F.R. § 214.2(f)(6)(iii)(A)*

Part A: To be completed by the Student

Last Name	First Name	WOU student ID #
Date of Birth (month/day/year)	Major	Degree Level ☐ Undergraduate ☐ Graduate
Phone Number	E-mail Address	
U.S. Address (street, apt number, city, state, postal code)		
Courses (including credits) that are causing academic difficulties	Term Requested for RCL: ☐ Fall ☐ Winter ☐ Spring ☐ Summer Year: _____	

Student Signature: _____ **Date:** _____

Part B: To be completed by the Professor/Instructor of listed course or Advisor

This student needs less than a full course load because: (select the appropriate reason)

☐ he/she is having initial difficulties with English language proficiency in a particular course(s) during his/her first term at WOU.

☐ he/she is having difficulties with reading requirements.

☐ he/she is having difficulties with American teaching methods in a particular course(s).

☐ he/she was improperly placed in a course(s) that he/she was not prepared to take.

List the course(s) relevant to this request: _____,_____,_____

Additional relevant notes may be included on the reverse side of this form.

I recommend that this student register for less than a full course of study during the term requested and confirm that the above information is correct to the best of my knowledge.

Instructor/Adviser's signature: _____Date: _____

Printed Name _____Phone Number: _____

Please return this form to OIED in Maaske Hall using campus mail or return to student.

Additional Notes:

_____

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For OIED office use only:

- ❑ **Date stamp**
- ❑ **Approved by International Student Advisor**
- ❑ **Denied by International Student Advisor**

- ❑ **SPACMNT**
- ❑ **OIED DB updated**
- ❑ **Approval E-mail Sent (CC: ISSA Staff)**

Advisor/DSO Signature :_____ **Date:** _____

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