# http://www2.uncp.edu/ucm/logos/wordmark/uncp_wordmark.jpg

# 

**F-1/J-1 Reduced Course Load (RCL) Application**

**The complete RCL application must be submitted to IP prior to the first day of classes.**

The information on this page reflects F-1 visa status-related policies and guidance of international Programs (IP) and does not necessarily reflect or include the policies or requirements of other units on campus, such as the Graduate School.

Before reviewing these exceptions, students should determine if their enrollment is full-time or less than full-time.

International students in F-1 or J-1 status are required to maintain full-time enrollment throughout the duration of their program. Full-time enrollment is generally interpreted as 12 or more credit hours for undergraduate students and 9 or more credit hours for graduate students. There are some circumstances, however, in which fewer credit hours are considered "full-time" because of a student's progress in their degree or the remaining requirements of their program.

**IP does not determine the full-time / part-time enrollment status for international students and the standards for determining enrollment levels do not differ between domestic and international students. Instead, IP supports the policies of the Graduate School when determining if an F-1 or J-1 student is enrolled full-time / part-time. IP is only involved when the student is determined to be less-than-full-time based on the below process(es):**

***Undergraduate students:***Enrollment below 12 credit hours is rarely considered as full-time for undergraduate students, except in their final semester. Undergraduate students must seek the guidance of their academic advisor to determine if enrollment below 12 credit hours can be considered as full-time enrollment.

.  
***Graduate Students:***

1. To determine full-time enrollment, graduate students should first refer to the enrollment policies provided by the Graduate School. Additional enrollment information may be required by students if they have been awarded and award.
2. If the charts included above do not fully answer questions regarding enrollment, graduate students should contact their assigned academic advisor in their academic department.
3. If full-time enrollment is still unclear after speaking to their advisor, the student and/or advisor should contact the grad school.

After following the steps above, a student will have confirmation that they are a) enrolled full-time or b) enrolled less than full time:

**Students Enrolled Full-time** are not required to notify or take any action with IP. IP accepts the determination of the appropriate office, for example, Division of Undergraduate Academic Programs or the Office of Registration & Records (for undergraduate students) or the Graduate School (for graduate students) regarding full-time enrollment, and does not require the student to complete any paperwork in IP.

**Students Enrolled Less Than Full-time** must read the requirements for Reduced Course Load (RCL). To maintain lawful F-1 status, an RCL is the only authorization available for students enrolled less than full-time. Students that have read the RCL requirements, and do not fit into any of the RCL categories should contact IP to discuss the implications of under-enrollment.

To qualify for the Student Blue Insurance students must meet minimum enrollment requirements (one credit for graduate students; six credits for undergraduate students). To drop below these levels international students must demonstrate proof of "other" credible insurance before IP can approve the RCL.

For students that are enrolled less than full-time, the following are situations in which it MAY be possible, necessary and appropriate for IP to authorize an RCL:

1. If the student is medically unable to maintain a full-time course load (with letter of recommendation from Counseling Center or physician).
2. If a student is having difficulty during the *first* semester of enrollment due to (1) initial difficulties with the English language or (2) with the reading requirements.
3. If the student has been placed in or advised by their academic advisor to take a course at an improper course level OR if a student is unfamiliar with American teaching methods (with letter of explanation from Advisor).
4. If the student is in his/her final semester.

**RCLs for Medical Reasons:**  
RCLs for medical reasons require documentation from a medical professional who can attest to the difficulty and explain why a reduction in course load is recommended. With a medical RCL it is permissible to drop some or all courses and the RCL is valid for only ***one semester*** at a time but may be renewed each semester for up to one year if necessary. Following the semester(s) of RCL it is expected that the student will continue to enroll as a full-time student unless it is the student’s final semester. Please do not drop below full-time - or fail to register full-time - until you receive confirmation that the RCL request is approved in SEVIS.

The RCL form plus accompanying documentation should be submitted in person during an appointment with an IP. Students on an award may not be eligible for an RCL - consult both your advisor and the grad school to confirm enrollment requirements.

**Academic Hardship RCLs:**  
RCLs for academic difficulty reasons require completion, submission and IP approval of the RCL Form ***BEFORE*** dropping below full-time. The Academic Advisor must indicate on the form the academic reason for the RCL request and in signing the form indicate that they do not object (from an academic advising perspective) to the student receiving an academic RCL for that stated reason. IP may need to request, or the Academic Advisor may wish to provide, additional information related to the academic circumstances which justify the academic RCL. A student may not drop below half of the required credits that make up a full time semester. **Students should not drop below full-time - or fail to register full-time - until first receiving approval of the RCL from IP.**

**Final Semester RCLs:**  
If a student is in his/her final semester and will be [considered to be enrolled less than full-time](http://internationalservices.ncsu.edu/determining-full-time-less-full-time-enrollment), that student should submit his/her completed [RCL form](http://www.ncsu.edu/ois/forms/documents/reducedcourseload_january2015.pdf) before the first day of the requested semester. He/she should pre-register for the intended number of reduced credits. A scheduled appointment is not required for paperwork submission but is encouraged if a student has questions/concerns about program completion in his final semester. An RCL authorized for a final semester (which shortens the Program End Date in SEVIS to that semester) cannot be extended. A student MUST complete his/her program by the end of the semester. If a student or academic advisor anticipates a significant delay in completion beyond the anticipated final semester, please speak with IP as soon as possible. The RCL form may be submitted in person of via email.

**STUDENT SECTION:** *Please complete this section of the form if you are the student.*

LAST Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ First Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Banner ID \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Anticipated I-20 End Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Major \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Degree Level \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Have you ever had a Reduced Course Load (RCL) at this education level? \_\_\_ Yes \_\_\_ No If yes, what were the dates and the reason for the RCL? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Semester of Intended RCL \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Number of Credits to be Taken \_\_\_\_\_\_\_\_\_\_\_\_

The purpose of the RCL Application is:

\_\_\_\_\_ Medical necessity *(Please provide medical documentation from a licensed medical doctor, doctor of*

*osteopathy, or licensed clinical psychologist)*

*\_\_\_\_\_* Initial difficulty with English language or reading requirements *(Valid for first semester only)*

*\_\_\_\_\_* Improper course level placement OR unfamiliarity with US teaching methods *(Please attach letter of*

*explanation from Advisor)*

*\_\_\_\_\_* FINAL semester of study *(Valid for Thesis and students only)*

**Please check the following if they apply**

\_\_\_\_\_ I certify that I have maintained full-time enrollment each required semester, I have updated my Banner information with my current U.S. address, and am attaching the necessary funding to cover the period of my needed extension to this form. I certify that I will purchase and maintain adequate medical health insurance while underenrolled.

­­­­\_\_\_\_\_I certify that I understand the requirements, procedures and ramifications stated in this form.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
Signature Date

Communication with IP during your approved RCL is required, especially at midterms, at the end of your approved RCL and if there is an emergency affecting you or UNCP. If we are not able to reach you we will reach out to your emergency contact. All information must be valid for the entire length of the RCL. If your emergency contact’s information changes during your RCL period, contact IP within 10 days. Your Emergency contact will only be contacted should we not be able to reach you. It is recommended you use people who can speak on your behalf, make decisions for you and be able to work swiftly in case of an emergency.

**Emergency contact**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Relationship to Student: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone number 1: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone number 2: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email 1: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email 2: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Current Physical Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**ACADEMIC ADVISOR SECTION:** *Please complete as the assigned Academic Advisor for this student.*

Undergrad Advisor Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Date

Grad Advisor Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Date