

REDUCED COURSELOAD (RCL) REQUEST FORM

In accordance with 8 CFR 214.2(f)(6) all F-1 status international students must enroll for a full Courseload (minimum of 12 credits for undergraduate, 9 credits for graduate) for the duration of their degree program to maintain F-1 status. There are, however, certain academic and medical circumstances for which an F-1 status student would be eligible and be authorized for a Reduced Courseload (less than full time study):

Academic

- Initial difficulty with the English Language
- Initial difficulty with the reading requirements
- Unfamiliarity with the American Teaching methods
- Improper course level placement
- Final Term of Study – Completing Coursework

Medical

- Due to a student's temporary illness or medical condition for a period of time not to exceed an aggregate of 12 months while the student is pursuing a course of study at a particular program level.

RCL Requests

A Reduced Courseload Request may be made to a Designated School Official (DSO) in the Office of International Student Services (ISS) at any time. The approval of the request is subject review by the ISS along with the input of the student's Academic Advisor, Department Chair, Academic Dean, and in some circumstances the Office of the Chief Academic Officer.

If fewer than normal courses are needed to complete the degree program, the DSO can authorize part-time enrollment during the final term. **Less than full time enrollment approval for this reason can be used only once.** If a student does not graduate by the end of the term, the student must register for a full-time course of study in the next available term, with the exception of the summer term.

If the student is seeking a Medical Reduced Courseload (MRCL) or Medical Leave of Absence the student must provide medical documentation from **a licensed medical doctor, psychiatrist, doctor of osteopathy, licensed psychologist, or clinical psychologist¹** to the DSO to substantiate the illness or medical condition.

An RCL of two or more consecutive semesters will result in the student needing to be Re-admitted to their degree program through the Office of Admissions (<https://www.udc.edu/admissions/re-admit-student-admissions/>).

RCL's will NOT be approved for the following:

- Lack of funding
- Course Sequence/Availability
- Personal matters not of a medical nature

¹ Subject to updates of the CFR submitted on December 12, 2022: *Removal of Obsolete Procedures and Requirements Related to F, J, and M Nonimmigrants.*
<https://public-inspection.federalregister.gov/2022-26013.pdf>



Office of International Student Services
University of the District of Columbia
4200 Connecticut Avenue, NW
Washington D.C. 20008
Phone: 202-274-6317
Email: international@udc.edu

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Instructions: The fields below must be completed by the Student and the Department Chair/Academic Dean then submitted to the Office of International Student Services (ISS) for review and approval.

Section A – To Be Completed by the Student

First Name _____ Middle Name _____ Last/Family Name _____
UDC ID Number _____ SEVIS ID Number _____ UDC Email _____
U.S Phone Number _____ Current U.S. Address _____
Campus: _____ Community College _____ Van Ness (Flagship) _____

Current Major _____ Academic Level _____ Current I-20 Expiration Date _____

Student Attestation: I understand that I am permitted one (1) Reduced Courseload per academic level (except Medical RCL), and I will be enrolled full time in the next term of study (Fall or Spring). I agree to the F-1 Maintenance Status terms and conditions set forth by the U.S. Department of Homeland Security: <https://studyinthestates.dhs.gov/students/maintaining-status>

Student Name _____ Student Signature _____ Date _____

Section B – To Be Completed by the Department Chair or Academic Dean. The above student is requesting a Reduced Courseload and will be enrolled less than full time. Please complete the fields below providing details of the request

Request RCL Term: Fall of _____ Spring of _____
Number of credits to be taken during the RCL term (0 to 11.5-UG, 0 to 8.5-GR)

RCL Reason: Select One

Academic

- _____ Initial difficulty with the English Language
_____ Improper course level placement
_____ Initial difficulty with reading requirements
_____ Unfamiliarity with American Teaching methods
_____ Final Term of Study – Completing Coursework

Medical

- _____ Temporary illness or medical condition

Department Chair/Academic Dean Attestation: I have met with the student listed in **Section A** regarding their request for Reduced Courseload Request (RCL), degree progress, and completion. I can confirm that there are documented and recognized (academic or medical) circumstances which merit an RCL.

Name of Department Chair/Academic Dean _____ Phone Number _____ UDC Email Address _____

Department Chair/Academic Dean Signature _____ Date: _____

To Be Completed by a Designated School Official (P/DSO):

Name of DSO: _____ SEVIS Updated on: _____