

**OFFICE OF INTERNATIONAL STUDENT SERVICES**  
**2400 6<sup>th</sup> Street NW, Administration Building # G10**  
**Washington, DC 20059**  
**Tel: 202-806-2777/2775**

**PART-TIME ENROLLMENT CERTIFICATION FORM**

Students with F-1 and J-1 immigration status are required by U.S. immigration regulations to maintain full-time registration status for the duration of their academic programs. Full-time status is defined as registration for a minimum of 12 credit hours for undergraduates and 9 credit hours for graduate students. However, these regulations allow students to register for less than full-time credit hours under limited circumstances, listed below. Your Dean or academic Advisor must recommend and approve the appropriate reason. **Return the completed form to the Office of International Student Services so that the form may be processed by USCIS.**

**TO BE COMPLETED BY STUDENT**

Family Name \_\_\_\_\_ Given Name \_\_\_\_\_

Street Address \_\_\_\_\_

City, State and Zip Code \_\_\_\_\_

Telephone # \_\_\_\_\_ Sevis # \_\_\_\_\_

Degree Major \_\_\_\_\_ Level (Circle One) BA/MS MA/MS Ph.D. CERT.

ID#: \_\_\_\_\_ Immigration Status \_\_\_\_\_ Expiration Date \_\_\_\_\_

**Semester Requested** \_\_\_\_\_ **Spring 20** \_\_\_\_\_ **or** \_\_\_\_\_ **Fall 20** \_\_\_\_\_

**TO BE COMPLETED BY ACADEMIC ADVISOR OR DEAN**

I have advised this student to register for part-time study during the current semester because he or she has:

\_\_\_\_\_ Illness or medical conditions

\_\_\_\_\_ Improper course level placement

\_\_\_\_\_ Initial difficulty with reading requirements

\_\_\_\_\_ Initial difficulty with the English language

\_\_\_\_\_ Unfamiliarity with American teaching methods

\_\_\_\_\_ To complete course of study in current term

\_\_\_\_\_ Doctorate Student in Candidacy

\_\_\_\_\_  
Advisor's Name – Print Name                      Signature                      Date

**Do not write here**

Approved \_\_\_\_\_ Not Approved \_\_\_\_\_ International Student Advisor \_\_\_\_\_