

**REQUEST FOR REDUCED COURSE LOAD (RCL) FOR F-1 STUDENTS**  
**Office of International Education, 216 MacMillan Hall**  
**Miami University, Oxford, Ohio 45056**

Student's Name: \_\_\_\_\_ Major field of study: \_\_\_\_\_

Banner #: \_\_\_\_\_ Email address: \_\_\_\_\_

This student is requesting a Reduced Course Load (RCL) in the \_\_\_\_\_ Semester, 20\_\_\_\_ for the regulatory or other reason cited below:

\_\_\_\_ This student is in the final term of the degree, does not need to take 12 hours and will/has enrolled for a number of credits needed to complete the program of study (Have your adviser certify this below.)

\_\_\_\_ This graduate student has completed formal coursework and is engaged in writing a thesis, dissertation or doing research.

\_\_\_\_ This student is having initial English language or reading difficulties.

\_\_\_\_ This student is having difficulties in understanding American teaching methods.

\_\_\_\_ This student has been placed in an improper course level.

\_\_\_\_ This student has a medical condition and can not enroll for this term or needs to drop below a full course of study. (Have a doctor verify there is a medical condition and give the amount of time needed to recover. Such authorization needs to be done at the beginning of each semester and may not exceed an aggregate of 12 months while pursuing a course of study.)

**Comments by Academic Adviser or Doctor:**

\_\_\_\_\_  
Name and title of adviser or doctor

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Telephone # of adviser or doctor

\_\_\_\_\_  
Date

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For Office of International Education Use Only

Reduced Course Load: \_\_\_\_\_ Approved \_\_\_\_\_ Denied

\_\_\_\_\_  
PDSO/DSO Signature

\_\_\_\_\_  
Date