KERNEL UNIVERSITY
905 South Euclid Street, STE213, Fullerton, California 92832
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Reduced Course Load Form

Family/Last Name: _____ First Name: _____

Date of Birth: _____ Kernel ID Number: _____

First Semester at: _____ SEVIS Number: _____

Telephone Number: _____ Degree Objective: ◯Bach ◯Master ◯Doc ◯Other: _____

Field of Study: _____ Current Status: ◯F-1 ◯J-1 ◯Other: _____

Expected Graduation: _____ Email Address: _____

Local U.S. Address: _____

Federal regulations require F-1 and J-1students to **ENROLL** in and **COMPLETE** a full course of study each required academic term in order to maintain valid nonimmigrant student status. F-1 and J-1 students who are unable to enroll full time must submit a Reduced Course Load (RCL)Form to the DOS for review and approval.

RCL REQUEST DEADLINE: First day of the semester,unless otherwise approved by the DSO.

NOTE: Submission of the Reduced Course Load (RCL) Form to the Designated School Official(DSO) does not automatically constitute approval. If additional information is required, the DSO will contact the student and/or academic advisor for clarification.

THIS PORTION TO BE COMPLETED BY THE ACADEMIC ADVISOR

Please select the appropriate reason for the RCL from one of the following categories.

Category 1: Final Semester
This reason may be used only during the student's final semester when fewer courses are required to complete the program.
◯ The student needs _____ units in order to graduate at the end of this semester.

Category 2: Medical Reasons
A letter from a licensed medical doctor (MD), doctor of osteopathy (DO), or licensed clinical psychologist is required.
◯ Illness or other medical conditions (physical/mental)

Category 3: Academic Difficulties—select one of the following reasons.
NOTE: Students must remain enrolled in at least one-half of the credit hours required for a full course of study.
These reasons can be used only once per degree level. An RCL based on academic difficulties may be authorized only once per progtam level and only during the student's initial academic term

◯ Initial difficulties with reading requirements—May be used during the initial academic term only
◯ Initial difficulties with the English language—May be used during the initial academic term only
◯ Unfamiliarity with U.S. teaching methods—May be used during the initial academic term only
◯ Improper course-level placement

RCL Semester/Year Requested: **Number of Units the Student will Enroll In: _____**

As the academic advisor for this student, I recommend approval of the reduced course load indicated above.

_____ _____ _____
_ Academic Advisor(Print Name) Signature Date