

Reduced Course Load Request

Part A: To be completed by the student.

Date _____

Name _____

Student Identification Number _____

Address _____
Street City State Zip

Home Phone (____) _____ Work Phone (____) _____

Do you currently have documentation on file with Student Support Services that supports your request for a Reduced Course Load? YES _____ NO _____

Course Load Request _____

Rationale _____

Part B: To be completed by the Director of Student Support Services.

REDUCED COURSE LOAD APPROVAL

_____, Student ID #__-__-____, has a documented disability that has been reviewed by the Director Student Support Services. The Director has reviewed the impact of the disability in the context of the student's proposed schedule and has determined that a reduced course load is a reasonable accommodation under Section 504 and/or the Rehabilitation Act and/or the Americans With Disabilities Act.

The student may register for no fewer than ___ credits for the current semester. The accommodated course load will be treated as the student's minimum course credit load for full-time status, entitling the student to all the benefits and services of a full-time student.

Part C: To be completed by the student, the Director of Student Support Services, and the Director of the Office of Scholarships and Financial Aid.

I acknowledge that I have read the Policy on Eligibility of Students taking Reduced Course Loads while maintaining Full-time Status, and have listened to the Director of SSS explain to me the potential impact of taking a reduced load on making sufficient progress toward meeting graduation requirements, course sequencing, eligibility for honor distinctions, billing, financial aid, and insurance coverage.

I understand that the reduced course load approval is for the current semester only and that if any time during the semester I drop below the accommodated minimum course load, I lose my full-time status and accept all the consequences which that change entails. In accepting reduced load/full-time status, I hereby accept these conditions and restrictions.

Student

Date

Director of Student Support Services

Date

Director of the Office Scholarships and Financial Aid

Date

Cc: Vice-Chancellor for Academic Affairs
Director of the Office Scholarships and Financial Aid
Academic Advisor
Registrar
Bursar