

International Programs International Student Advising and Services

Oregon State University, Heckart Lodge, 2900 SW Jefferson Way, Corvallis, 97331

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CONCURRENT ENROLLMENT

International students who would like to enroll at Oregon State University (OSU) and another SEVIS-approved school at the same time should request permission for "concurrent enrollment". You should meet with an International Student Advisor and <u>meet with your Academic Advisor in your department and obtain your advisor's recommendation **prior** to the term for which you would like to take concurrent enrollment. To be eligible for concurrent enrollement:</u>

- Total enrollment at both schools must amount to a full course of study (12 credits for undergraduate students and 9 credits for graduate students). No more than a **total of 3 credits of online classes** (between both schools) can count toward full-time enrollment per term. If you are a sponsored student, you will also need to check with your sponsor to find out if there are any restrictions to taking or paying for classes at another school while at OSU.
- Students must be full-admitted OSU degree students and enrolled for a minimum of 3 credits at OSU to be eligible for "concurrent enrollment".
- If you are enrolled in the <u>Degree Partnership Program (DPP)</u>, you may need to enroll in concurrent enrollment each term to have those classes count for immigration purposes.

This completed form must be received in International Student Advising and Services no later than the end of the second week of classes of the term for which the request applies. Please attach proof of registration for all courses you will take at the other institution. If you have an unusual situation, please contact an International Student Advisor.

PART I (to be completed b	y the student)				
Last name (family)		First nar	me (given)		
Student ID	Phone		_ Email		
Current U.S. Address : Street		Apt	City	State	Zip Code
Degree Level (circle) Bachelo	r's Master's PhD Po	st-Bacc	Major		
Term for which this form applic	es (circle)	Fall \	Winter Spring	g Summer	200
Name and location of other sch	nool you wish to attend _				
Please explain how the propos	ed coursework at the sch	ool listed abov	e is connected to	your academic pro	ogram at OSU:
understand that I must regist	er for and <i>complete</i> all c	redits listed be	low to maintain	my F-1 status.	
Student's Signature	Date				
PART II <i>(this section must</i>	be completed by the A	A <i>cademic Ad</i>	visor)		
This student is requesting appr reviewed the student's reques nis/her academic plan. Please o	t and that you are in agre	ement that the	•	•	
Student's expected date of gra	duation (mo/day/yr)	JJ			
Please specify the classes and rather that the student's academic degree		e student is pr	oposing to take a	at the school listed	above and how these fit wit
Academic Advisor's signature			Date		
Name and title (please print) $_$					
Department	Phone		E-mail		
International Student Advising	g and Services use only				
Concurrent Enrollment: Approved I			Date	# Previously Approve	d Concurrent Enrollments