

This form is used for students who will not be enrolled full time during an academic term yet the Department considers them to be maintaining full time status due to a specific academic program design. This request must be received by OISS no later than the end of the second week of classes of **EACH TERM. A student who drops below a full course of study without prior approval of a Designated School Official (DSO) is considered out of status.**

If a graduate international student will not be enrolled full time during an academic term yet the academic department considers him/her to be full time, based on one of three approved reasons, the WSU Office of International Students and Scholars (OISS) may authorize a Full Time Equivalency (FTE) **for this student.** This FTE allows OISS to report full-time enrollment to SEVIS to maintain the student's F1 status.

NOTE: Full Time Equivalency is for the purpose of maintaining immigration status only. You may not be considered an active student for other purposes.

WHO CAN QUALIFY

An FTE may be granted in the following circumstances:

- A. A **Masters Candidate** who is currently enrolled for 1 credit working full time on their thesis because they have met one of the following:
1. Completed 8 credit hours of course #8999 (Thesis/Plan A) or
 2. Completed 3 credit hours of course #7999 (Essay/Plan B)

Please note for Master's candidates, if you are in your last semester you should apply for a last semester exception to full time enrollment. Master's candidates working on a thesis can use the Full Time Equivalency form for only one semester of your current degree program unless additional time is needed in which you must complete another FTE form along with a letter from your academic advisor or department. Approval for an additional term will be by the discretion of the OISS Advisor based on the recommendation from your advisor or department.

- B. A **Doctoral Candidate** who is completing the coursework this semester and will be starting 9991 the following semester.

Note: Students holding candidate status (course # 9991, 9992, 9993, 9994), or Ph.D. Maintenance Status (course #9995) are considered full-time and do not need to complete this exception form.

ACADEMIC ADVISOR LETTER REQUIREMENTS

A letter from the academic advisor or department is required. The letter should state that the following information:

- That the student is considered to be full time by the department
- What the student will be doing during the term of FTE authorization (please refer to allowable FTE approval reasons above)
- The number of credits, if any, for which the student will register during the term of FTE authorization

FULL TIME EQUIVALENCY CHECKLIST

- Please bring the following to a meeting with an OISS advisor:
- Attach a copy of the plan of work
- Attach an unofficial transcript downloaded from Pipeline
- This completed and signed form
- Signed letter from academic advisor/ department head (requirements above)

SECTION A: TO BE COMPLETED BY THE STUDENT

PERSONAL DATA

Last Name:	First & Middle Name:
Date of Birth:	Visa Type:
SEVIS ID:	WSU ID:
Email:	Phone:
Current Degree Program:	<input type="checkbox"/> BA <input type="checkbox"/> BS <input type="checkbox"/> MA <input type="checkbox"/> MS <input type="checkbox"/> Ph.D. <input type="checkbox"/> Pharm. D. <input type="checkbox"/> Other Please Specify: _____
Major:	Department:

I am registering for _____ credit hours during the _____ semester of _____ (year) and request that my academic load be considered as full time enrollment for immigration purposes for the reason indicated.

- I am a **Masters Candidate**. I have completed all my coursework, am registered for at least 1 credit hour and am working full-time on my thesis/essay (check one):
 - 8 credit hours of course #8999 (Thesis/Plan A)
 - 3 credit hours of course #7999 (Essay/Plan B)
- I am a **Ph.D. Student** completing my last semester of coursework before Doctoral Dissertation and coursework (9991) begins ____/____ (Month/Year)

I certify that I have read the instruction sheet and that the above information is accurate.

Student's Signature: _____ Date: _____

SECTION B: TO BE COMPLETED BY STUDENT'S ACADEMIC ADVISOR

I certify that I have reviewed the above Request for Exception from full time equivalency, a recent transcript, the student's academic file, and where applicable a Degree Audit Form or a Plan of Work form for this student. I further certify that all information on this form is accurate in conformance with applicable Departmental, College and University policies, and is in the best interest of the student's successful academic progress. I therefore recommend that this student be permitted to take _____ credit hours during the _____ semester of _____ (year).

I do not recommend that the above request be granted to this student for the following reason(s):

Print Name: _____

Department	Phone:
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Advisor's Signature: _____ Date: _____

OISS STAFF ONLY

The above request for an exception from full-time enrollment per 8 CFR 214.2(f)(6)(iii) of the Immigration and Nationality Act as amended is:

Approved

Denied. You must add sufficient credit hours to raise your enrollment status to full time (8 credit hours) or you will be considered to be out of status by the Immigration and Naturalization Service. Reason for denial:

Reviewed By: _____ Date: _____

OISS Director must approve if the student is applying for full time equivalency for the third time.