This form must be completed by a licensed medical doctor, doctor of osteopathy, or licensed clinical psychologist.

Student Name: ________________________________  University ID Number: ________________

J-1 students must enroll full-time during Fall and Spring semesters according to immigration regulations. “Full time” is generally defined as 12 credits for undergraduate students, 12 credits for non-degree students, and 6 credits for graduate students.

A student may be authorized to enroll in fewer or no credits if they would be unable to enroll and succeed in a full course of study due to illness, injury, or other medical condition.

Attention Medical Professional:

Indicate below your recommendation that the student enrolls in a reduced course load; you do not need to include details about the student’s medical condition.

This recommendation is for the following Semester/Term:  Fall 20__  Spring 20__  Summer 20__

A new recommendation will be required for each semester.

Due to illness, injury, or other medical condition, I recommend this student:

☐ Enroll in a reduced number of credits  ☐ Not enroll in courses this semester

Signed ________________________________  Print Name ________________________________

Title ________________________________  Date ________________________________