Request for Concurrent Enrollment

Part I: BIOGRAPHICAL DATA (To be completed by the student)	
FAMILY NAME:	**FIRST/MIDDLE NAME:**
CURRENT IMMIGRATION STATUS: ☐ F-1/J-1 STUDENT ☐ J-1 SCHOLAR	**SMU ID NUMBER:**
CURRENT MAJOR ON I-20/DS-2019:	**CURRENT PROGRAM END DATE ON I-20/DS-2019:**

Part II: TO BE COMPLETED BY ACADEMIC ADVISOR OR DEPARTMENT CHAIR	
NAME OF OTHER SCHOOL IN WHICH STUDENT WILL ENROLL CONCURRENTLY:	
STUDENT WILL ENROLL CONCURRENTLY DURING: ☐ SPRING ☐ SUMMER ☐ FALL OF YEAR:	
TOTAL CREDIT HOURS AT SMU:	**TOTAL CREDIT HOURS AT OTHER SCHOOL:**
NAME OF ACADEMIC ADVISOR/DEPARTMENT CHAIR:	**PHONE NUMBER:**
E-MAIL:	**SIGNATURE & DATE:**

PART III: STUDENT CERTIFICATION OF UNDERSTANDING (To be completed by the student)

Enrollment Requirements:
- F-1/J-1 students are required to enroll full-time during fall and spring semesters
- Summer enrollment is not required unless it is the first semester at SMU, or the first semester in a new program
- Majority of all required enrollment hours must be taken at SMU
- Only 3 credit hours of online or hybrid courses will count towards the full-time enrollment requirement

Reduced Course Load for Concurrent Enrollment Requirements:
- Classes must apply towards your degree at SMU and classes must be transferrable
- I understand that I can only drop below full-time **AFTER** approval from the ISSS office
- I understand that I will not request to drop my classes at my other school, which will place me below full-time
- I understand that I need to provide proof of enrollment at my other school and a copy of my transcripts showing completion of the concurrently enrolled classes
- I understand that I will have an enrollment hold on my account until I submit a copy of my transcripts

I certify that I have read and understood the information above and that the information I have provided on this form is true to the best of my knowledge and the credit hours taken will count toward my degree requirements.

Student Signature: _____   Date: _____

Part IV: International Advisor Certification

I certify that at the time of the signature, the student above is maintaining F-1 status with Southern Methodist University and is approved to take courses concurrently while retaining Form I-20 from SMU.

Advisor/DSO Signature: _____   Date: _____