Concurrent Enrollment Request

I. OVERVIEW

An F-1 student may be enrolled in two different SEVIS-approved schools at one time as long as the combined enrollment amounts to a full time course of study. See 8 CFR § 214.2(f)(6)(iv).

II. ELIGIBILITY

A student is eligible to concurrently enroll in the following instance:

1. The student will be registered less than full-time at Kent State and is relying on enrollment at another school in order to meet the full-time course load requirement (12 credits for undergraduates; 8 credits for graduates). The student’s academic department at Kent State will accept transfer credit for coursework completed at the second institution, if necessary.

A student who is granted concurrent enrollment must provide ISSS with a copy of his/her registration at the second institution prior to the end of the drop/add period at Kent State. If the student is registered full-time at Kent State, he/she does not need special permission to take additional courses at another school. If a student is on suspension from Kent State, he/she needs to contact an international student advisor.

III. TO APPLY

1. If you meet the above requirements, complete Section IV of this form and ask the international student advisor at your other college or university (not Kent State) to complete Section V.

2. Return this form to International Student and Scholar Services (ISSS) at Kent State before the end of Kent State’s drop/add period for the semester of concurrent enrollment.

IV. TO BE COMPLETED BY THE STUDENT

Please print:

____________________________________________________________________________________
First (Given) Name  Last (Family) Name             SEVIS #
___________________________________________________________________ _________@kent.edu
Major                  Department        Email
____________________________________________________________________________________
Degree Level (Undergraduate, Master’s, Ph.D., etc.)      Banner ID #

I certify that I understand what constitutes full-time enrollment for my program. Between my registration at Kent State and my registration at the second institution, I meet the full-time enrollment requirement as described in Section II of this form. I will be registered for at least one credit at Kent State. If I change my registration in any way at Kent State or the second institution without prior approval from an international student advisor at Kent State, I may lose my F-1 student status.

__________________________________________________________________________________
Student Signature           Date
V. TO BE COMPLETED BY THE INTERNATIONAL STUDENT ADVISOR
(Second Institution)

☐ I grant permission for this student to be concurrently enrolled in my institution and Kent State University, as long as the conditions outlined on this form are met.

How many credits will the student carry at your institution? _______________________________

For which academic session are you approving concurrent enrollment?

☐ Fall  ☐ Winter  ☐ Spring  ☐ Summer  __20___

This academic session begins on ___/___/______ and ends on ___/___/______

Name of Institution                                Institution’s SEVIS School Code

__________________________________________________________________________________

International Student Advisor Name (Print)         Date

__________________________________________________________________________________

International Student Advisor Signature         Email

VI. TO BE COMPLETED BY THE INTERNATIONAL STUDENT ADVISOR
(Kent State)

This student may concurrently enroll during: ☐ Fall  ☐ Spring  __20___

This academic session begins on ___/___/______ and ends on ___/___/______

By signing, I indicate that I have reviewed the student’s request for concurrent enrollment and ensured that the student’s course load between Kent State registration and registration at the second institution constitutes full-time enrollment. I therefore approve the student’s request for concurrent enrollment for the semester indicated in Section VI of this form.

International Student Advisor Name (Print)

International Student Advisor Signature         Date Approved