

**International Student Services**  
**Authorization for Concurrent Enrollment**

International students are required to obtain authorization for concurrent enrollment while in the U.S. in accordance with the United States Citizenship and Immigration Services (USCIS) regulations in order to maintain legal F-1 student status. Total combined enrollment from CSUDH and other U.S. institutions must meet the full-time requirement. Students must be enrolled in full-time units by the Add/Drop deadline of each semester at CSUDH. Students will need to submit copy of transcripts after completing course(s).

**\*Undergraduate students must register minimum 9 units in CSUDH.\***

**TO BE COMPLETED BY STUDENT: (SECTION 1, 2, and 3)**

<b>SECTION 1: STUDENT PERSONAL INFORMATION</b>	
TODAY'S DATE (MM/DD/YYYY):	CSUDH STUDENT ID NUMBER:
LAST NAME:	FIRST NAME:
DATE OF BIRTH (MM/DD/YYYY):	SEVIS NUMBER: N
PHONE NUMBER:	EMAIL:
MAJOR:	EXPECTED GRADUATION DATE:
CURRENT DEGREE LEVEL: <input type="checkbox"/> BACHELORS <input type="checkbox"/> MASTERS	

<b>SECTION 2: COURSE INFORMATION</b>	
COURSE (A)	
Name of course:	Institution/school:
Number of units:	Is this your last semester at CSUDH?: <input type="checkbox"/> Yes <input type="checkbox"/> No
Course start date:	Course end date:
Which <u>CSUDH</u> term are you requesting concurrent enrollment: <input type="checkbox"/> Fall <input type="checkbox"/> Spring <input type="checkbox"/> Summer	

COURSE (B)	
Name of course:	Institution/school:
Number of units:	Is this your last quarter at CSUDH?: <input type="checkbox"/> Yes <input type="checkbox"/> No
Course start date:	Course end date:
Which <u>CSUDH</u> term are you requesting concurrent enrollment: <input type="checkbox"/> Fall <input type="checkbox"/> Spring <input type="checkbox"/> Summer	

<b>SECTION 3: STUDENT ACKNOWLEDGEMENT: PLEASE INITIAL AND SIGN BELOW</b>	
<input type="checkbox"/> I will discuss the transfer of units with my Academic Advisor/Department	
<input type="checkbox"/> I understand the course transfer requirements.	
<input type="checkbox"/> It is my responsibility to obtain permission from my financial sponsor to take these classes concurrently at another educational institution.	
<input type="checkbox"/> I understand that I must submit proof of concurrent enrollment to the ISS office within 1 week of picking up my Concurrent Enrollment Letter and to submit transcripts after completing the course.	
<input type="checkbox"/> I understand that it is my responsibility to enroll in full-time units and failure to do so will jeopardize my F-1 student status.	
Student's Signature:	Date:

<b>SECTION 4: COMPLETED BY CSUDH INTERNATIONAL STUDENT SERVICES</b>	
The student above is in valid F-1 status at CSUDH. The student is authorized to take classes at another institution.	
DSO NAME:	TITLE:
PHONE NUMBER:	EMAIL:
SIGNATURE:	DATE:

**ISS Use Only:** Date Received: \_\_\_\_\_ Advisor: \_\_\_\_\_ Ready for Pick-Up: \_\_\_\_\_  
 International Student Services, College of Extended and International Education, CSU  
 Dominguez Hills, 1000 E. Victoria St., Carson, CA 90747, [iss@csudh.edu](mailto:iss@csudh.edu), 310.243.3786