

Please read each item below carefully. You are responsible for following these rules and regulations and, by signing, you are confirming that you have read and understand this form. If you do not understand and/or have questions, please ask an international student advisor for clarification before signing the form.

As an F-1 international student, I agree to do the followings:

1. I will remain a full course of study during the academic semesters;
 - Undergraduate 12 units
 - Graduate 8 units
2. I will consult with International Student Services staff and obtain approval PRIOR to falling below full time enrollment each semester.
3. I will not enroll more than 3 units of online class per semester to be counted toward the full time requirement.
4. I will make satisfactory progress toward completion of my program and will keep the I-20 valid during my study at CSUDH. If I cannot complete my current program by the expiration on the I-20, I will file a program extension request PRIOR to the expiration date.
5. I will not accept employment on or off campus without International Student Services and USCIS/DOS approval.
6. I will not work on campus more than 20 hours per week while school is in session.
7. I will notify the International Student Services of my intent to transfer to another U.S. school.
8. I will keep my passport valid at all times.
9. I will submit my I-20 for a travel authorization to the International Student Services at least 2 weeks BEFORE I leave the U.S. for vacation if I have the intent of returning to continue my study at CSUDH.
10. I will report changes of my major, program level, funding source, emergency contacts, U.S. address, and/or phone number to International Student Services within 10 days of change.
11. I will update U.S. address on my CSUDH portal and will submit the address change form to the International Student Services, if there is a change.
12. I will maintain valid health insurance coverage for the duration of my program at CSUDH. I will purchase the insurance coverage 2 weeks PRIOR to the enrollment appointment date to register for the following semester. If I am sponsored by my government, I will submit updated financial guarantees PRIOR to the expiration date. I understand that my registration hold will remain until I submit the financial guarantee.
13. I will pay for tuition fees within given time to avoid disenrollment of my classes. If my classes are dropped, then it is my responsibility to add them back to maintain full course of study.

By signing below, I confirm that I understand my responsibility to follow the rules and regulations mentioned above to be in compliance with university policy and immigration regulations.

STUDENT'S NAME:	STUDENT'S SIGNATURE:	DATE:
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