

**To the Student:** Concurrent enrollment allows an F-1 student to maintain full-time status, while also enrolled at another institution. Complete this form, and submit proof of enrollment (beginning of the semester) to the SLDL Office. At the completion of the semester, you are required to submit proof of course completion.

Allow 5-7 business days for processing. You must have the authorized I-20 in-hand to begin (or continue) concurrent enrollment. **DO NOT ENROLL IN COURSES OUTSIDE OF CGU WITHOUT PROPER AUTHORIZATION** (authorized dates on I-20). To review SEVIS regulations on concurrent enrollment, refer to [8 CFR 214.2 \(f\)\(6\)\(iv\)](#).

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**Student Information**

CGU ID# 254 - \_\_\_\_\_

Last Name \_\_\_\_\_

First Name \_\_\_\_\_

Department/Program \_\_\_\_\_

Requested Semester \_\_\_\_\_

**Concurrent Enrollment Information**

Name of University: \_\_\_\_\_

Semester and Year of Attendance: \_\_\_\_\_

Course Name: \_\_\_\_\_

- *Students must submit form each semester of enrollment.*
- *Students approved for a Reduced Course Load are not eligible to enroll in concurrent enrollment.*

Student Signature (required): \_\_\_\_\_ Date: \_\_\_\_\_

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**To the Academic Advisor:** Students must receive departmental approval from their assigned Academic Advisor to participate in concurrent enrollment. To approve concurrent enrollment, the Academic Advisor must verify and sign that (1) the student has permission from the department to enroll in the course; (2) the combined units at CGU and the other university are 8 units or more; and (3) that the units earned at the other school will count toward the student's CGU degree requirements.

Academic Advisor Name: \_\_\_\_\_

- The student has permission from the department to enroll in the course.
- The units earned at the other school will count towards the student's degree requirements at CGU.
- The cumulative units taken at CGU and the other school are at least 8 units.
- The student is currently making satisfactory academic progress.

Academic Advisor Signature (required): \_\_\_\_\_ Date: \_\_\_\_\_