



This form is to be used by PhD students taking preliminary or qualifying exams to request a certificate of full time equivalency from the U-M International Center. You must meet with an International Student Advisor to submit this request. When your request is ready, call 734.647.0658 to arrange a meeting with an advisor.

LAST NAME	FIRST NAME	MIDDLE NAME	UNIQUENAME	UMID #
DATE OF BIRTH (mm-dd-yyyy)	GENDER <input type="checkbox"/> FEMALE <input type="checkbox"/> MALE	NUMBER of DEPENDENTS	TELEPHONE	SEVIS ID # N
DELIVERY METHOD <input type="checkbox"/> PICK-UP (If someone else will pick up for you, his/her name is: _____) <input type="checkbox"/> SHIP (See " <a href="#">SHIPPING OPTIONS</a> "): <input type="checkbox"/> eShip Global <input type="checkbox"/> U.S. Mail				

**Important notes. Please read.**

- Graduate students may request FTE when they are engaged in full time study on prelim/qualifying exams without being registered full time.
- Full time is 8 credits for graduate students or 6 credits for graduate students with GSI/GSRA/GSSA 50% appointment.
- You must either be full-time enrolled or approved for FTE by the Drop/Add deadline set by the University Registrar each term.
- Failure to gain FTE approval will cause loss of F-1 status and termination of your SEVIS record.
- You will keep a copy of your academic advisor's letter for your records.
- Students must take at least 1 credit while on FTE.
- Multiple terms of FTE are discouraged. Please consult your department or Rackham.

**Checklist of required documents.**

- A letter from your academic advisor written on letterhead following the guideline on the [IC website for FTE](#).
- Print-out of electronic Most Recent [I-94](#) or copy of paper I-94
- Copy of current I-20 (not including instruction page) or DS-2019
- Unofficial transcript printed from [Wolverine Access](#) (not official transcript)

**Read the statement below, sign and date.**

*I certify that I have read the request form instructions and information in full, and to the best of my knowledge, the information I have provided is accurate. I understand that I must have U-M approved health insurance for the duration of my F-1/J-1 status and that if I have any dependents, they too must have health insurance. I also understand that I must report address changes through Wolverine Access within 10 days of any change in current (U.S.) or permanent (out-of-U.S.) address.*

Signature \_\_\_\_\_ Date \_\_\_\_\_

**To be completed only by ISSA**

- Academic term \_\_\_\_\_ Number of credits enrolled \_\_\_\_\_
- FTE for academic work on (Specify)
  - Preliminary exam
  - Qualifying exam

ISSA initials \_\_\_\_\_ Date: \_\_\_\_\_