



International Center

20 Sawyer Avenue, Medford, MA 02155 TEL: 617-627-3458 FAX: 617-627-6076
internationalcenter@tufts.edu <http://ase.tufts.edu/center>

FINAL SEMESTER Reduced Course Load (RCL) Request

Instructions: Please complete this entire form and forward it to the appropriate advisor at the International Center.

Part I: Student Information

Last Name: _____ First Name: _____ TuftsID: _____

Academic Program: _____ Degree: _____

Part II: Reason for RCL

Last Semester

Graduation Date (mm/dd/yy): _____

Part III: Academic Dean or Graduate Advisor Endorsement

Print Name: _____

Signature: _____