



Concurrent Enrollment Permission Letter Request Form

F-1 international students may take classes outside Skyline College with permission. This is called “Concurrent Enrollment”. *You must obtain a permission from ISP BEFORE taking courses off campus.*

Follow the instructions below if you would like to do the concurrent enrollment:

1. Complete the Concurrent Enrollment Permission Letter Request Form.
2. Submit this form signed by International Student Program (ISP) to the school you wish to take a course with.
3. Register for the course, following the school’s instruction.
4. Obtain an official proof of class registration and submit it to ISP.
5. When a grade is posted, submit your transcript to ISP.
6. Meet with a counselor if you wish to transfer the units to Skyline College.

TO BE COMPLETED BY STUDENT:

Student Name (Last Name, First Name): _____

Student ID#: _____ SEVIS #: _____

Semester: _____ Year: _____

Name of other school in which you plan to enroll concurrently: _____

Name of the course you plan to enroll: _____

Total units at Skyline: _____ Total units at other school: _____

Important Notes:

- ✓ **You must register for minimum 9 semester units at Skyline College.**
- ✓ **You must have a total of 12 or more semester units to maintain your F-1 student status.**
- ✓ **Consult with an academic counselor to make sure the course you will be taking at other school will count toward your degree or transfer.**

I have read and understood the rules and regulations relating to my concurrent enrollment. I also confirm the above information is complete and accurate. By typing my name below, I am electronically signing my form.

Student Signature: _____ Date: _____

TO BE COMPLETED BY INTERNATIONAL STUDENT PROGRAM DSO:

This is to certify the above student is an F-1 international student at Skyline College. The student’s SEVIS record is active and s/he has a valid I-20 with Skyline College. S/he has our approval to enroll in course(s) at your institution. Please call 650-738-4430/7179 or e-mail skyinternational@smccd.edu should you have any questions.

Name & Title	Signature	Date
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