

## INTERNATIONAL STUDENT PROGRAM

## **PETITION: CONCURRENT ENROLLMENT**

Fall
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Winter

Summer

Year: \_\_\_\_\_

**WHAT IS CONCURRENT ENROLLMENT?** Students can petition to enroll in classes at a different college/university while maintaining full-time or part-time status at West Los Angeles College.

**Spring** 

LA COLLEGE	FULL-TIME ENROLLMENT AT WLAC + ENROLMENT AT ANOTHER COLLEGE	PART-TIME ENROLLMENT AT WLAC + ENROLLMENT AT ANOTHER COLLEGE				
Have enrolled and will complete at least 12 units at WLAC for current semester.		Have enrolled and will complete a minimum of 8 units at WLAC for current semester.				
Fully paid all fees due to WLAC and within the LACCD		Fully paid all fees due to WLAC and within the LACCD				
<ul> <li>Submit petition to <u>studentvisa@wlac.edu</u> or International Student Program (SSB 410)</li> <li><b>NOTE:</b> You are still required to complete a minimum of 12 units at WLAC, even if you complete additional units beyond WLAC.</li> </ul>		<ul> <li>Submit petition to <u>studentvisa@wlac.edu</u> or International Student Program (SSB 410) <u>AND</u> attach a copy of your most recent Comprehensive Student Education Plan (CSEP) demonstrating the need to enroll in classes beyond WLAC.</li> <li>NOTE: You are required to provide proof of enrollment at WLAC and other college(s) to satisfy full-time enrollment.</li> </ul>				
	• IF DECLINED: You may not enro	IF DECLINED: You may not enroll outside of WLAC.				
		• IF APPROVED: Submit proof of enrollment for all non-LACCD colleges within 10 days of approval				
		AND Provide official/unofficial transcripts within 10 days of class completion				
Note: Failure to satisfy each of the provisions above will result in the termination of your I-20						

## Submit petition and supporting documents at least 5 business days before the add deadline.

YOUR PERSONAL INFORMATION					
LAST NAME			FIRST NAME		
DATE OF BIRTH				LACCD ID #	
EMAIL				PHONE #	
ADDITIONAL PETITION DETAILS					
I REQUEST CONCURRENT ENROLLMENT FOR: (provide term and year)					
I WISH TO ENROLL AT: (provide name of college)					
I WISH TO ENROLL IN: (provide name of class)					
EXPLAIN THE REASON YOU WISH TO ENROLL IN THIS CLASS					
STUDENT SIGNATURE				DATE	

Submit petition and supporting documents to <u>studentvisa@wlac.edu</u> or International Student Program (SSB 410). Allow 5 business days for processing. You will receive an email notification. Notifications will be sent to your LACCD student email account.

INTERNATIONAL STUDENT PROGRAM OFFICE USE ONLY						
Denied	Approved – SEVIS ENTRY NOT REQUIRED (Full Time)	Entered in SEVIS – authorization to drop below full-time				
NOTES:						

DATE

DSO SIGNATURE