



REQUEST FOR ACADEMIC OVERLOAD



Policy:
(Excerpt from College Catalog)

"Students desiring to take more than 18 credit hours must obtain approval from the designated college official. "...only students with a grade point average of 3.0 or higher for the preceding semester or first semester students who were in the upper quarter of their high school graduating class are permitted to carry more than 18 credit hours."

Date _____

Name _____ Student ID# _____

Email address _____

Mailing address _____

City/State/Zip _____

I desire to enroll for a total of _____ semester hours which is an overload of _____ hours for the
Fall____ Spring____ Summer____ semester.

Semester Classes	Credits	Courses for Overload	Credits

Total Credits Completed =

Cumulative GPA =

FOR OFFICIAL USE

Credits earned in most recent Semester (F _____ SP _____ SU _____)

Semester GPA _____ Cumulative GPA _____

Approved/Denied _____
Signature Date

Reason:

