



**OVERLOAD PETITION FORM**

Student Name: \_\_\_\_\_ Student ID #: \_\_\_\_\_

Major: \_\_\_\_\_ Cell Phone # \_\_\_\_\_

**GUIDELINES:**

- 1) A normal semester course load entails 12 to 18 credits.
- 2) Approval to schedule an overload is contingent upon a student's demonstrated ability. Policy requires a 2.500 minimum G.P.A.
- 3) An approved "overload" will be subject to additional charges.
- 4) Requests must be completed and recommended by the student's Academic Advisor before the courses can be approved and scheduled by the Registrar's Office.

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Course requested as overload: \_\_\_\_\_

Reason for this request: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Student Signature: \_\_\_\_\_

Date: \_\_\_\_\_

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Comments/Conditions: \_\_\_\_\_  
\_\_\_\_\_

Recommended by: \_\_\_\_\_  
(Academic Advisor)

Date: \_\_\_\_\_

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Registrar's Office Use:

\_\_\_\_\_ G.P.A.      Approved \_\_\_\_\_      Denied \_\_\_\_\_

Registrar's Office: \_\_\_\_\_

Date: \_\_\_\_\_