

# Undergraduate Overload Request Form

Today's Date: \_\_\_\_\_ Semester Affected: \_\_\_\_\_  
 Name: \_\_\_\_\_ Current Major: \_\_\_\_\_  
 ID #: \_\_\_\_\_ Total Credits Earned: \_\_\_\_\_  
 Email Address: \_\_\_\_\_ Current COMBINED GPA: \_\_\_\_\_  
 Phone #: \_\_\_\_\_ Anticipated Date of Graduation: \_\_\_\_\_

**Undergraduate Students Only:**

List ALL of the courses you wish to take. This includes the courses that you have already registered for and the courses that will make your registration an overload. Please include the course number and number of credits for each course.

**Summer Session:**

In addition to the course number and number of credits, you must also indicate the session in which the course will be taken and total number of weeks course is offered. Failure to furnish this information will result in a processing delay.

Course #	Course Name	# Cr	Session (Summer Only)	# of Weeks (Summer Only)	Dates
TOTAL NUMBER OF CREDITS →					

**Do not write in this section**

Approved      Advisor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 Comments: \_\_\_\_\_

Dean's Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 Comments: \_\_\_\_\_

NOT Approved      Advisor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 Comments: \_\_\_\_\_

Dean's Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 Comments: \_\_\_\_\_