

Please print or type all information clearly.

Student's Name:	W#:	Email:
Major:	Cumulative GPA: (Minimum GPA 2.5 required)	
Effective Semester: <input type="checkbox"/> Fall <input type="checkbox"/> Spring <input type="checkbox"/> Summer	Year: 20 _____	

Course Information						Course Approval
CRN	Course Prefix	Course No.	Course Title	Section	Course Credits	Instructor of Course Signature
12345	BIO	350	Environmental BIO/Lab	A	4	**Example Only**

Credit Overload: More than 20 credits for a maximum of 24 credits
Total number of Credits Requested: _____
Reason for Overload: _____

****Please complete one form for each course****

Dean Signature:	Date:
Dean Name: (Please Print)	
International Student Services Signature (if applicable)	Date:
Student Signature:	Date:

TO BE COMPLETED BY REGISTRAR'S OFFICE		
	PROCESSED BY	DATE

*A full-time student may not schedule an overload of courses without the approval of an Academic Dean. An overload is any number of semester credit hours over 20. No more than 24 credits or a total of six courses will be allowed.

**A student will be assessed a per-credit tuition charge for each credit exceeding 20 credits in addition to the full-time tuition charge for that semester. Refer to the tuition and fees portion of the catalog for more information.

***Full payment is required to complete a credit overload request.