REQUEST FOR OVERLOAD IN FALL OR SPRING: ___________________ DATE: ___________________
(Write in Term Yr.) (Today’s Date)

Instructions for completion of this form:

This form should be completed only if the student has some compelling need to take in excess of the normal allotted number of credits for the student’s program of study (21 credits for Music and Dance & Theatre majors; 21 credits for Castle Scholars; 19 credits for all other majors and for students yet to declare a major; 16 credits for students on academic probation).

After obtaining all appropriate signatures, submit the completed overload form to the Registrar’s Office. If the overload registration requires addition permissions, submit those with the form as well.

TUITION CHARGES: Beginning in Fall 2011, students enrolling beyond the maximum credits listed above will be billed at the credit hour rate for each credit hour enrolled over the maximum for their major. Fractional credit charges will be multiplied times the credit hour rate and included in the total. Students receiving financial aid will also be required to visit the Financial Aid Office for approval.

When registering for classes, students should, if possible, register for all courses with limited seat availability as part of their normally allotted credit limit, and reserve the “overload” for independent studies, senior evaluations, internships, or other individualized courses of study, for which a delay in registration would not cause the student to be “closed out” of the course. If the course in question has the potential to close out prior to the ADD/DROP deadline (see Academic Calendar), the student should seek approval from the department chair using the Faculty Consent Form to be registered into the course above the limit and this form should accompany this request.

Decisions on whether to approve requests to exceed the term credit limit will be made according to the following criteria:
1. Previously demonstrated academic excellence, as reflected by cumulative grade point average at the time of the request.
2. Previously demonstrated ability to successfully pursue to completion all registered credits in prior semesters of study
3. Demonstrated academic necessity to pursue an increased course of study in order to maintain satisfactory progress for degree completion.

If the request has been approved, and there are no current registration holds, the requested course will be added to the student’s upcoming term schedule and the student will be notified of the addition. If the request is denied, students will be notified of the reason for the refusal.

(Rev: TFM 11/2015)
REQUEST FOR OVERLOAD IN FALL OR SPRING: _______________ DATE: _____________
(Write in Term Yr.)              (Today’s Date)

Last Name: ____________________ First: ____________________ ID: __________

PLEASE NOTE: Registrations for more than 19 credits in a single term (or for more than 21 for Music or Dance & Theatre majors and Castle Scholars), if approved, will only be processed on or after the first week of the term.

To be completed by the student:
Class (circle one): Freshman   Sophomore   Junior   Senior   Other

Are you receiving financial aid (circle one)?   Yes   No   (If YES, MUST obtain permission below)

Current Cumulative Grade Point Average: __________

Declared Major: ____________________  Declared Minor/Second Major: ______________

Number of credits for which you are currently registered for upcoming term: _________________

Course(s) that you plan to add: _____________________________________________________
(Please attach completed add/drop form with all appropriate signatures to this request)

Total credits for which you will be registered if request is approved: _________________

Reason you are seeking to take an overload: ______________________________________

____________________________________________________________________________

Have you withdrawn from coursework in any semester prior to the current term? (circle one)   Yes   No

Have you ever withdrawn below 15 credits? (circle one)   Yes   No

*SIGNATURE AREA BELOW*

Student’s Signature: ____________________________________________________________

To be completed by the academic advisor:
I approve the registration for the course(s) above and the total number of credits, pending UG Dean approval.
Advisor’s Name and Signature: __________________________________________________

To be completed by Financial Aid Office (If Applicable):
I approve the registration for the course(s) above. Student has been advised of financial aid budget changes.
Fin. Aid Advisor Signature: ____________________________________________________

To be completed by the Dean of Undergraduate Arts & Sciences:
I approve ___ I deny ___ this request:
Dean’s Signature: ____________________ Date: ____________________

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*RETURN THIS FORM TO THE REGISTRAR’S OFFICE AFTER ABOVE IS COMPLETED*