Course Overload Application

Eligibility: **Available to full-time undergraduate students only.**

Full-time undergraduate students should earn 15-16 credit hours per semester. Special permission is required to take a Course Overload of more than 19 credit hours. To be considered a full-time student, one must register for and continue active enrollment in at least 12 semester hours for the entire semester.

Full-time undergraduate students who have 1) at least sophomore standing (30 credit hours earned) and 2) a 3.000 or above cumulative grade point average; or a 3.000 or above grade point average for the semester most recently completed, may, upon the approval of the Dean of the College/School in which the student is majoring, apply for a Course Overload.

A College/School Dean may make exceptions to the above eligibility criteria for Course Overloads.

The University reserves the right to reduce the course load of any student who registers for more than 19 credit hours without Course Overload approval.

Procedure:
1. Students must complete section 1 and include the reason for the request.
2. Secure the permission and signature of your advisor.
3. Secure the permission and signature of the Chair of the department of your major.
4. Secure the permission and signature of the Dean of the School or College of your major.
5. Deliver completed form, to the Registrar’s Office **no later than the end of the add/drop period for the semester or term in which you plan to overload courses.**

**SECTION 1:**

<table>
<thead>
<tr>
<th>Major: ________________________</th>
<th>Total Credit Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>Requested this Semester: ________</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>NAME: ________________________</th>
<th>CWID: ________________________</th>
</tr>
</thead>
</table>

Please provide your desired course schedule.
Include CRN and complete course/section information (ex. CRN: 12345 WRIT 101-12):

<table>
<thead>
<tr>
<th>Course 1: ________________________</th>
<th>Course 4: ________________________</th>
<th>Course 7: ________________________</th>
</tr>
</thead>
<tbody>
<tr>
<td>Course 2: ________________________</td>
<td>Course 5: ________________________</td>
<td>Course 8: ________________________</td>
</tr>
<tr>
<td>Course 3: ________________________</td>
<td>Course 6: ________________________</td>
<td>Course 9: ________________________</td>
</tr>
</tbody>
</table>
NAME:                                                                                       CWID:

Reason for Requesting Course Overload:

Section 2:
Cumulative GPA or Last Semester’s GPA: Total Credit Hours Completed: Office of the Registrar Registrar Validation: Date:

__________________ ________________ ________________________ ________________

Section 3: FACULTY - Please do not sign unless SECTION 2 has been completed and signed by Registrar:

Student ___________________________ Date ________________ Advisor ___________________________ Date ________________

Department Chair ___________________________ Date ________________ Dean ___________________________ Date ________________