Office of the Registrar
Credit Overload Application

SPRING and FALL SEMESTERS ONLY

Please allow 5-10 business days for processing.

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 Credit 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, register for a Credit Overload.

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

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

Procedure:
1. Students must complete section 1 and include the reason for the request.
2. Students must have Registrar complete Section 2, prior to obtaining signatures for Section 3.
3. Secure the permission and signature of your advisor.
4. Secure the permission and signature of the Chair of the department of your major.
5. Secure the permission and signature of the Dean of the School or College of your major.
6. 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:

Students Last Name, First Name – Please Print                   CWID

Email Address

@montclair.edu

Total Credit Hours Requested this Semester:

Note: Variable credit courses must include the desired number of credits the course will be taken for. This is not a registration form. Once processed, the student must register via NEST. Incomplete forms will not be processed.

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<th>COURSE</th>
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<th>CREDITS</th>
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<td>WRIT</td>
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Justification: _____________________________________________________________

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 Signature ____________________ Date ____________________
Advisor - Print & Sign ____________________ Date ____________________
Department Chair - Print & Sign ____________________ Date ____________________
Dean - Print & Sign ____________________ Date ____________________