COLLEGE OF BASIC AND APPLIED SCIENCES
REQUEST FOR CREDIT OVERLOAD
For approval, take this form to your assigned College Advisor in DSB 120
ALL HOLDS MUST BE REMOVED
BEFORE BEING PROCESSED

Name of Student ________________________________  M # ________________________________

Major ________________________________  Semester, Year ________________________________

(If Summer, indicate hours per session)

Total Semester Hours Desired ______  Full Term ________________

Total Hours Earned ________________  May Term (S1) ________________

Quality Point Average (GPA) ________________  June Term (S2) ________________

July Term (S3) ________________  RODP Term (R) ________________

Reason for Requesting Overload

_______  1. Quality Point Average

_______  2. Candidate for Degree Next Convocation

_______  3. Repeating _______ Hours

_______  4. Other: Explain ____________________________________________

NOTE: Exceptions to the following rules require the signature of the department chairman:

- Students must have a 3.5 average on all college work attempted in order to take 21 hours in a semester
- Students must have a 3.0 average in order to take 19 hours provided that 1 hour is MS, PHED activity or CSCI 1000.
- Graduating seniors may also be allowed an overload in the last semester prior to graduation.

__________________________  DATE  ____________________________  SIGNATURE OF FACULTY MENTOR

__________________________  DATE  ____________________________  SIGNATURE OF DEPARTMENT CHAIR (See note above)