

REQUEST FOR STUDENT OVERLOAD

Semester

(Fall, Spring, Summer)

(Instructions: Complete card obtain signatures requested. Keep with your registration material and turn the card in during registration.)

Name

Last, First Middle

Student ID#:

Graduation Date:

Major:

Sem. Hrs. Requested:

Classification:

Quality point average last term:

Overall quality point average:

No. of hours earned to date:

Dept. Chairman:

Date:

College Dean:

Date: