

REQUEST FOR EXCESS HOURS

COLLEGE OF NATURAL AND APPLIED SCIENCES

_____ Semester, 20__

Full Name w/Middle Initial: _____ M-Number: _____

Major: _____

Credit Hours Earned Prior to this Semester: _____

Overload Hours Being Proposed: _____

Previous Semester GPA: Cumulative GPA: _____

Proposed Course Load

Course Number Title Semester Hours

<u>Course</u>	<u>Number</u>	<u>Title</u>	<u>Semester Hours</u>

Please comment as to why you believe this overload is necessary: _____

Advisor's Recommendations: _____

Advisor's Signature: _____ Date: _____