

REQUEST FOR UNDERGRADUATE COURSE OVERLOAD

PART I. STUDENT INFORMATION

Student name: _____
Last (Family name)
First (Given name)
Middle

Mailing address: _____
Street
City
State
Zip code

Student ID: 000-_____ Email address: _____

Primary telephone number: _____ Current Program/Major: _____

PART II. REQUEST FOR COURSE OVERLOAD

Term for request: Fall Winter Spring Summer Year: _____

The maximum quarter hours an undergraduate student may attempt in a term without requesting an overload is 18 QH. To take more than 18QH, a student must be evaluated and cleared by the Senior Associate Dean for Academic Affairs or a designee. Criteria for clearance are completion of at least 24QH in CPS at a QPA of 3.0 or better or the prior completion of a bachelor's degree at a QPA of 3.0 or better. CPS reserves the right to waive or modify these criteria.

List all courses to be taken in the above identified term.

Course #	Course Title	Session	# of Credits

Please provide a brief (one-paragraph) rationale for requesting the course overload.

Student signature

Date

FOR OFFICE USE ONLY

Date assigned: _____ Assigned to: _____

Signature: _____ Date complete: _____ Petition: Accepted Denied

Comments: