



Office of the Registrar
Undergraduate Overload Approval Form
Winter/Summer Term

PROCEDURE:

1. Student completes form and obtains signatures.
2. Student returns completed form to Office of the Registrar.
3. Office of the Registrar registers student for course(s) below that contribute to the overload.

Student Name: _____ **Student ID:** _____

Home Phone: _____ **Cell Phone:** _____ **Work Phone:** _____

Summer Term

Students requesting to take more than 4 hours in the May, June I, June II, July I and July II three-week sessions need approval from the Advisor, Department Head, and Dean of your major.

Total Credit Hours _____

Students requesting to take more than 6 hours in the May, June I, June II, July I and July II four–eight sessions need approval from the Advisor, Department Head, and Dean of your major.

Total Credit Hours _____

Winter Term

Students requesting to take more than 4 hours in the Winter Term need approval from the Advisor, Department Head, and Dean of your major.

Total Credit Hours _____

Course(s) Involved in Overload

Term/Year: _____ **CRN#:** _____ **Course ID:** _____
Subject Course Section

Term/Year: _____ **CRN#:** _____ **Course ID:** _____
Subject Course Section

Student GPA: _____

Anticipated Date of Graduation: _____

Brief Explanation for overload:

Advisor Signature _____

Department Head Signature _____

Dean Signature _____

Revised 6/2015

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