

College of Education and Human Services Credit Overload Authorization

Name: _____

CWID: _____

Major: _____

Current Overall GPA: _____

I wish to apply for a credit overload. I am requesting that I be allowed to schedule _____ credits for the _____ semester of the year _____. I understand that in addition to the basic tuition fee, there is a per credit charge for credits scheduled in excess of 18.

Student Signature

Date: _____

My Current Schedule is:

Course Name (Example: ENG 101 01)	Credits:
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

The course(s) I wish to add are:

Course Name:	Credits:	Call Number
_____	_____	_____
_____	_____	_____

Advisor or Department Chair Signature: _____ Date: _____

Dean's Signature: _____ Date: _____