**iii Course Overload Request Form**

**Student Information**

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| --- | --- | --- | --- |
| Name |  | Andrew ID |  |
| Degree Program |  | Grad Year |  |
| Overload Semester |  | Max Units Requested |  |

**Proposed Overload**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Courses | Course # | Course Name | Semester/Mini (Indicate which mini) | Units |
| Current Schedule of Classes |  |  |  |  |
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|  |  |  |  |
| Overload Course |  |  |  |  |
| Extra-Curricular Activities |  |
| Internship / Job Search Status |  |
| Rationale for Overload |  |

**Signatures**

Student:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_

Advisor:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_

Program Director:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_ Approve Deny