Overload Request Form
Required when registering for more than 16 hours at pre-registration or 19 hours during open registration.

Today’s Date: ______________________________
Name: ___________________________________________________ UIN: _____________________________
Current Major: _____________________________ Cumulative GPR: ___________
Total # of hours you wish to take: _____________ Expected Graduation Date: ________________
Phone Number:__________________________ E-mail Address:______________________________________
Course and section you wish to add: ________________________________________ Semester: __________

Explain the reason for requesting this overload.

_____________________________________
Student Signature

Advisor Comments:

_____________________________________
Academic Advisor Signature

TO: Registrar
General Services Complex, Suite 1501

FROM: Dr. Valerie Taylor
Senior Associate Dean for Academic Affairs, Dwight Look College of Engineering

DATE: _____________________
Please allow ________________________________ a student in the College of Engineering
to add __________________________ (course/section) to his/her current schedule, resulting in an overload for the
_______________ Semester.

If you need additional information, please do not hesitate to contact me at 845-7200.

Thank you,

_______________________________
Dr. Valerie Taylor
Senior Associate Dean for Academic Affairs, Dwight Look College of Engineering