ID: __________ Name____________________________________________________________
(Please Print – Last, First, Middle )

Class Standing: FR SO JR SR  Quarter of overload: FA WI SP _______
(circle one) (circle one) (year)

Course to be added
(If Independent Study, attach separate form)

<table>
<thead>
<tr>
<th>Course or lab#</th>
<th>Section #</th>
<th>Synonym</th>
<th>Course Title</th>
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If the instructor’s permission is required, please provide here:

INSTRUCTOR’S NAME _________________________________________________________
INSTRUCTOR SIGNATURE ______________________________________DATE __________

Students may overload after completion of their first quarter of enrollment on a space available basis and on the condition that the following requirements are met:

• First Year Students: A minimum GPA of 4.00 is required at the time of the overload request and advisor approval is required. First year students may not overload in their first quarter of enrollment.
• Second Year Students: A minimum GPA of 3.50 is required at the time of the overload request and advisor approval is required.
• Third Year Students: There is no minimum GPA; however, students on academic probation may not overload. Advisor approval is required.
• Seniors: There is no minimum GPA; however, seniors may not overload in their SIP quarter. Advisor approval is required.

ADVISOR SIGNATURE ______________________________________ DATE __________

STUDENT SIGNATURE ______________________________________ DATE __________

Office Use ONLY
Class:_____ GPA:_____ SIP Qtr:_____ Processed by:_____

Revised 3/19/12