

## Consent for Overload

Student ID

## FOR UNDERGRADUATE AND POST-BACCALAUREATE STUDENTS

Students wishing to enroll in 22-25 credit hours are considered to be in academic overload and must complete this form (including academic adviser's signature) and submit it to the Office of the Registrar. PSU audit credit and transfer credit taken at other institutions while concurrently enrolled at PSU are counted in determining overload status. Students wishing to enroll in 26 or more credit hours must petition the Academic Requirements Committee. Transfer credit that result in an overload for a given term will not be accepted in transfer unless prior approval has been granted.

Name:			First	Phone: First			E-mail:					
Total Credits Earned: Cur			nulative GPA: Last term attended:				GPA that term:		Credit hours that term:			
Major: Minor: Stuc					nature:	Date:						
				То	be Comple	eted by Stu	dent					
PSU Course Schedule for which overload is requested:						Overload Courses at Another Institution (if applicable)						
Term Request	ted:		# of Credits Requested:			Term Req	uested:		# of Credits Requested:			
Reason for Overload:							Name of Other Institution:					
PSU Course Information:							Other Institution Course Information:					
CRN	Subject	Course Number	Section Number	Credits	Grade Option		Course Name			Credits	Grade Option	
				To be C	ompleted b	y Academi	c Adviser					

I have reviewed this student's academic record. The student has an acceptable record of course completion and is, in my judgment, capable of handling an overload. I approve the student's request for course overload.

Academic Adviser Signature

Extension