Overload Request



Term/Program Data

....

Once complete and validated by all signees, please submit to: **Registration@wvstateu.edu**

| | | Student Data |
|-------|-------|--------------|
| Name | | |
| ID | Phone | |
| Email | | |
| | | |

Current GPA

Semester/Yr.

Graduation Term

Major

| Englointy |
|---|
| Student has maintained a minimum 3.25 GPA in the previous 2 semesters |
| Total hours below including the including overload, do not exceed 21 hours (Summer cannot exceed 11 hrs.) |

| Current Schedu | | | | | irrent Schedule |
|----------------|---------|--------------|---------------|---------|-----------------|
| Subject/Dept. | Course# | Credit Hours | Subject/Dept. | Course# | Credit Hours |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

| Overload Course Information | | | | | | | | |
|-----------------------------|--|---------------|--|---------|--|----------|----------|--|
| CRN | | Subject/Dept. | | Course# | | Section# | Cr. Hrs. | |
| CRN | | Subject/Dept. | | Course# | | Section# | Cr. Hrs. | |

| | | | Total Term Credits |
|------------------------|----------------|-------------|---------------------------|
| Current Schedule Hours | Overload Hours | Total Hours | |

Explanation (Please provide specific information for each overload course requested.)

| I approve the above requested Overload | | | | |
|--|------|--|--|--|
| Student: | Date | | | |
| Advisor/ Chair: | Date | | | |
| Dean: | Date | | | |
| Provost: | Date | | | |