OVERLOAD APPROVAL FORM

2009-2010 Semester I

PLEASE PRINT

A. PERSONAL INFORMATION

ID# _____ **Last Name** _____ **First Name** _____ **M.I.** _____

Advisor _____ **Class** ☐ Fr ☐ So ☐ Jr ☐ Sr ☐ Sp(non-degree seeking)
(Expected status in Fall 2009)

Intended Major(s) _____ **Declared** ☐ yes ☐ no

Intended Minor(s) _____ **Declared** ☐ yes ☐ no

B. OVERLOAD INFORMATION

The academic load necessary to meet graduation requirements in eight semesters is 16 credits per semester. A full-time student must carry a minimum of 12 credits per semester. A student who wishes to carry more than 18 credits in academic courses per semester must have written permission from the academic dean. To be approved for an overload, students must successfully demonstrate a need for approval and have a minimum 3.00 Cumulative GPA.

COURSE #	COURSE TITLE	CREDITS	AUDIT (√)
BIO-120-01	**Life Science** EXAMPLE EXAMPLE EXAMPLE	**3**	EXAMPLE

TOTAL CREDITS _____

Student Signature _____ Advisor Signature _____

Overload approval of Academic Dean _____

WISCONSIN LUTHERAN COLLEGE