

COLLEGE OF ENGINEERING

Office of the Dean

Course Overload Form

Name: _____ Tech ID: _____

Major: _____ Semester: _____

Classification: _____ Expected Graduation Date: _____

Adjusted GPA: _____ Hours Requested: _____

Briefly Explain the reason for taking more than 19 hours in the Spring/Fall semester or more than 8 hours in Summer 1 or 2. How many hours do you plan to dedicate to each 3 hour course?

Student Signature *Date*

Department Representative *Date*

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For Dean's office Use Only

☐ *Approved*

☐ *Not Approved*

Dean's Office Representative *Date*

