

**MOTLOW COLLEGE**  
**Student Overload Permission Form – Summer Only**

*Use only to request an excess of 16 hours*

Term \_\_\_\_\_ Date \_\_\_\_\_

Student's Name \_\_\_\_\_ Student's I.D. No. \_\_\_\_\_

Total hours requested including overload \_\_\_\_\_

Cumulative grade point average \_\_\_\_\_

Grade point average last semester \_\_\_\_\_

Major/Emphasis \_\_\_\_\_

**Anticipated courses scheduled for this semester:**

CRN	SUBJECT	COURSE	CREDIT HOURS

**Reason for requesting overload:**

**1. Candidate for graduation on following date** \_\_\_\_\_

**2. Repeating** \_\_\_\_\_ **hours**

**3. Other** \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_

**Recommended by:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
*Advisor*

**Approved by:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
*Academic Dean*

Original Admissions  
 Cc Advisor