Saint Joseph’s University Course Overload Request Form

Date: _______________  Current Term: _______________  Class Year: _______________

Student Name: __________________________________________________________

Student ID #: ______________________

Major: ___________________________  Current College:  ☐ College of Arts & Sciences  ☐ Haub School of Business

1. I request to take a SIXTH course:

<table>
<thead>
<tr>
<th>CRN</th>
<th>Course #</th>
<th>Sec.</th>
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</table>

For the following reason(s): _________________________________________________________

________________________________________________________________________________

☐ I understand that there will be an additional tuition charge for a sixth course (please see Hawk Central (BL 121) for information on the exact amount that will be charged)

☐ I understand that permission to take a sixth course requires a superior academic record; exceptions may be made at the discretion of the dean's office

Signature of Student: _____________________________________________________________

Cumulative GPA: ________  GPA for past two semesters: (1)__________  (2)__________

2. Completed by your ADVISOR:

Request has been discussed with the student and is:  ☐ recommended  ☐ not recommended

Comments: ____________________________________________________________

________________________________________________________________________________

Signature of Advisor: ___________________________________________________________  Date: ______________

3. Completed by the ACADEMIC DEAN:

- CAS students may drop off this form in the CAS Dean's Office (BL 113)
- HSB students may have this form signed in the William F. Leahy Advising Center (MV 289), and then take it to Hawk Central (BL 121)

Request has been:  ☐ approved  ☐ not approved

Comments: ____________________________________________________________

________________________________________________________________________________

Signature of Academic Dean: _________________________________  Date: ______________