MURRAY STATE UNIVERSITY
COURSE OVERLOAD FORM

UNDERGRADUATE STUDENT

IF AN EXCEPTION IS TO BE MADE IN ANY INDIVIDUAL INSTANCE, AN UNDERGRADUATE STUDENT MUST HAVE A CUMULATIVE GPA OF AT LEAST A 3.O **OR** AT LEAST 3.0 FOR THE PREVIOUS SEMESTER. SEE THE CURRENT UNDERGRADUATE BULLETIN FOR DETAILED INFORMATION.

SUBJECT: Undergraduate Student Course Load Waiver

DATE: _____

TO: Kristi Jackson, Assistant Registrar/Registration

FROM: _____ _____
Collegiate Advisor (signature required) **Collegiate Chairperson** (signature required; if applicable)

_____
Collegiate Dean (signature required)

Reset Form

THIS SECTION TO BE COMPLETED BY STUDENT

Full Name: _____ SS# _____

Address: _____

Phone #: _____

****Course to be added: _____ Entry #: _____**

**Student must obtain appropriate overrides from instructor (i.e. closed, permission, etc.) in order to add via myGate once overload form is approved. It is the student's responsibility to add the additional class via myGate after overload approved.

*** 500-level courses are only open to students who have or will have **earned** 60 hours or more, or graduate students.

NOTE: OVERLOADS WILL NOT BE APPROVED FOR COOP/INTERNSHIPS

Please check one: ____Fall Semester ____Spring Semester ____Summer Semester

GPA of Applicant: Overall:_____ Previous Semester: _____ Verified_____
(Registrar's initials)

Total hours requested: _____ (19 hours is maximum course load; maximum overload is 3 additional hours)

EXCEPTIONAL CIRCUMSTANCES ONLY

This section to be completed by the Provost and Vice President for Academic Affairs ONLY IF student is seeking approval for more than 22 semester hours. **If Dean is requesting approval for an overload in excess of the maximum course overload, a justification must be attached for Provost's review.**

_____ _____
Provost and Vice President of Academic Affairs Date

Student Instructions:

1. Complete student section,
2. Obtain appropriate signatures, and
3. Return signed form to the Registration Office, 1st floor, Sparks Hall.
4. The Registrar's Office will verify accuracy of above information before processing.

_____ _____
Registrar's Office Approval Date