

The University of Louisiana at Monroe
College of Arts, Education, and Sciences
Advising Form: **Overload Request**

Name _____ CWID _____ Date _____

Advisor _____ Major _____ Minor _____

Anticipated Graduation Date _____ Semester/Session Requested _____ Academic Year Requested _____

Cumulative GPA _____

Course	Number	Section	Hours
Total Hours			

Minimum Requirements:

(check all that apply)

- 2.5 or greater GPA
- Impending graduation
- All remedial courses complete
- All freshman math courses complete
- All freshman English courses complete

Please attach a degree check sheet

Reason for Overload _____

Student's Signature and Date _____

Advisor's Signature and Date _____

- Approve
- Disapprove

Director's Signature and Date _____

- Approve
- Disapprove

Dean's Signature and Date _____

- Approve
- Disapprove