WHITWORTH UNIVERSITY

Office of the University Registrar

Overload Credit Registration Request

Student Name _____ **Student ID** _____

Term & Year _____ **Total number of credits approved (max 20)** _____

Cumulative GPA _____ **Are you on Academic Warning or Probation?** _____

Students wishing to register for more than **16 credits** in a semester must complete this form and obtain approvals from their advisor and the Student Accounts office. This form should accompany the **Add/Drop Form** with the course(s) placing the student in overload.

I have spoken with my advisor and Student Accounts and affirm I understand the academic and financial implications of registering for overload credits.

Student Signature _____ **Date** _____

REQUIRED - Advisor Approval

I have discussed the implications of taking overload coursework with my advisee, and I believe them capable of handling the additional work that comes with this decision. I affirm they are in good academic standing and the information on this form is true. They are approved to take up to the total number of credits listed above.

Advisor Signature _____ **Date** _____

REQUIRED - Student Financial Services

I have discussed the financial implications of taking overload credits with the student named above. They have been informed of any additional fees and charges.

Overload Charges ☐ Yes ☐ No

Student Accounts Signature _____ **Date** _____