

**GRADUATE SPECIAL PETITION  
CREDIT OVERLOAD**

**INSTRUCTIONS:**

- 1.) **CLICK ON THE GRAY AREAS TO TYPE IN THE REQUIRED INFORMATION**
- 2.) **COMPLETE ALL SECTIONS OF BOTH PAGES COMPLETELY AND SECURE REQUIRED SIGNATURES. ATTACH EXTRA PAGES WHERE NECESSARY.**
- 3.) **ATTACH APPROPRIATE DOCUMENTATION**
- 4.) **PRINT AND SUBMIT PETITION TO THE GRADUATE OFFICE (IS 1144)**
- 5.) **THE FINAL DECISION WILL BE POSTED TO THE MEMORANDUM SECTION OF YOUR TRANSCRIPT.**

**STUDENT INFORMATION** ( please print)

Name \_\_\_\_\_

Student Number \_\_\_\_\_ Address \_\_\_\_\_

Graduate Program \_\_\_\_\_  
City/State \_\_\_\_\_ Zip \_\_\_\_\_

Phone Number \_\_\_\_\_

E-Mail Address \_\_\_\_\_

Cumulative GPA \_\_\_\_\_ Earned Credits \_\_\_\_\_

Current academic status (Select one):    good standing        probation        suspension

(Continue to page 2)

**ACTION (For Office Use Only)**

Decision:                    Approved                    Denied

Action: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Comments/Notes:

Graduate Program Chair \_\_\_\_\_ Date \_\_\_\_\_

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**FOR THE STUDENT: Complete this section.**

Number of credits you wish to take: \_\_\_\_\_

Semester for which you are requesting overload: \_\_\_\_\_

**Address the following questions on a separate sheet, when necessary:**

Why do you need the credit overload?

Explain why you believe that you can be successful while carrying a credit overload.

What additional out-of-class commitments will you have? Discuss work, volunteer activities, hours-per-week, etc.

Have you requested a credit overload in the past? If yes, what was the outcome of that request?

Provide a semester-by-semester plan, even if tentative, that shows the need for a credit overload, based upon your academic plan.

I agree to pay any and all additional tuition and fees or penalties resulting from approval of this petition. (Consult with Student Billing, SS1700/465-2224, if you have any questions.)

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

**SUPPORTING SIGNATURE:**

You are encouraged to seek the supporting signature of your faculty or staff adviser.

Comments:

Signature \_\_\_\_\_ Date \_\_\_\_\_