

CHARLESTON

SCHOOL OF LAW

ENROLLMENT OVERLOAD REQUEST FORM

Except in extenuating circumstances, a full-time student's total course credit load in any given semester shall not exceed 16 hours.

Name: _____ Class: _____ Student ID #: _____

Entering Status: ☐ Full-Time ☐ Part-Time Number of Credit Hours Needed for Graduation: _____

SEMESTER: _____ YEAR: _____ GPA: _____
(Fall/Spring) (Cumulative)

I would like to enroll in the following total number of hours this semester: _____

REASON FOR REQUEST:

☐ Graduation ☐ Other, please explain: _____

Signature: _____ Date: _____

PLEASE RETURN SIGNED FORM TO THE ACADEMIC AFFAIRS OFFICE

OFFICE USE ONLY

☐ Approved ☐ Denied ☐ Student Notified _____

Associate Dean of Academic Affairs: _____ Date: _____

Received: _____ By: _____ Processed: _____