Dept. of Population Health Sciences

262 Wallace Hall

295 West Campus Dr., Blacksburg, VA 24061

Course Overload (Overhours) Request

Student Information					
Last Name:	First Name/MI:	Student ID No:			
Advisor:	Phone:	VT Email:			
Major:	Overall GPA:	Level: FR SO JR SR			
Total Hours Requested	Term you plan to take courses: Fall Sp	oring Summer Winter Year			

Directions:

Any student wishing to take more than 19 hours in a semester or 9 hours in a summer session should complete this form.

- 1. Complete this form during the Drop/Add period (not during course request)
- 2. Schedule an appointment with your PH Advisor to review and discuss your request. Your advisor will submit the form to the department for approval
- 3. You will be contacted if your request is DENIED or if additional information is needed regarding your request.
- 4. If your GPA is between 2.0 and 2.5, you may request overhours only if graduating this term and these overhours are *required* to complete graduation requirements. If your GPA is below 2.0 you may not request overhours.
- 5. Processing of this form **DOES NOT** register you for any courses. Once **Overhours** has been approved you will be notified and can add/force add the course/s. Students are responsible for adding any additional courses.

Reason for request:				

List your course schedule for the semester in which the overload is requested. List all courses you wish to take. All information is required.					
Dept	Course #	CRN/Course Title	Hours	A-F or P/F (check one)	
				A-F	P/F
				A-F	P/F
				A-F	P/F
				A-F	P/F
				A-F	P/F
				A-F	P/F
				A-F	P/F
				A-F	P/F
Student Sigr	nature:		Date:		
Advisor Signature: Date:					

Program Director Signature:

Office	Use	Only
--------	-----	------

Date Received:

Date Processed:

Processed by:

Date: