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| **UNCP ID** | **8** | **4** | **0** |  |  |  |  |  |  |

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| **Student Information** |
| **Last Name** | **First Name** | **Middle** **Initial(s)** | **Suffix****(Jr., II., etc.)** |
| **Home Phone** | **Cell Phone** | **Email****@bravemail.uncp.edu** |

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| **Overload Request Information** |
| **Number of TOTAL hours you wish to take** |  | **Circle the semester you wish to take these hours** | **Fall/ Fall 3 Spring** **Maymester/Summer I Summer II** |
| **Reason for the overload request** |
| **Classification (check one)** | **Senior (90> hrs)** |  | **Junior (60-89 hrs)** |  | **Sophomore (30-59 hrs)** |  | **Freshman (30< hrs)** |  |
| **Expected Graduation** | **Term** |  | **Year** |  | **Applied for Graduation?** | **YES** |  | **NO** |  |

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| **FACULTY/STAFF USE ONLY** |
| Present Cumulative GPA *(to be completed by Advisor or Dept. Chair)* | GPA= |
| **REQUIRED SIGNATURES** |
| **Advisor or Dept. Chair (Print)** | **Signature** | **Date** |
| **Dean (Print)** | **Signature**  | **Date** |
| **Academic Affairs Designee (Print)** | **Signature** | **Date** |