

Fox School of Business | Temple University
Center for Undergraduate Advising

OVERLOAD PETITION

(APPROVAL REQUIRED for more than 18 credits fall/spring semester or more than 8 credits in one summer session)

****A cumulative GPA of 3.0 and MEETING WITH AN ACADEMIC ADVISOR is required for approval.**

Name: _____ Date: _____

TU ID#: _____ Email Address: _____@temple.edu

Term for which you are requesting overload: _____

Please list each course you wish to complete during the overload term:

Department Name	Course #	# of Credits

Total Credits: _____

Please summarize the reason(s) for your request. (Use reverse side or attach typed explanation if necessary.)

Please summarize the reasons you will be successful completing this overload. (Use reverse side or attach typed explanation if necessary.)

My signature below affirms that: (1) I understand the risks involved in pursuing an overload (2) I recognize my overload approval applies ONLY to the courses listed above, and (3) I am aware of the deadlines for DROP and WITHDRAWAL for the specified term.

Student Signature: _____ Date: _____

DO NOT WRITE BELOW THIS LINE

Decision: Approved Denied

Advisor Signature: _____ Date: _____