

The College of New Jersey  
School of Nursing, Health and Exercise Science

**ACADEMIC OVERLOAD REQUEST FORM**

Instructions – Student's requesting to take more than 4.5 course units in a semester must request permission from their school dean or assistant dean and meet eligibility requirements (see below). If approved, this completed form must be brought to Records and Registration prior to course enrollment.

**NAME: (please print)**

**PAWS ID:**

**MAJOR:**

**E-MAIL:**

**CELL PHONE:**

**SEMESTER REQUESTING OVERLOAD:**    **FALL 20**\_\_\_\_    **SPRING 20**\_\_\_\_  
(complete **ONLY** one)

**HAVE YOU RECEIVED PERMISSION FOR OVERLOAD PREVIOUSLY?**  
**IF YES, SPECIFY WHICH SEMESTER(S) AND EXPLAIN.**

**ANTICIPATED GRADUATION DATE:**

**EXPLAIN REASON FOR REQUEST:**

**Student Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

**Department Chair Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

**POLICY NOTICE:** It is the policy of The College of New Jersey that the Office of the Dean **may** give permission to carry more than 18 credits, or more than 4.5 courses, *only to students with at least a 3.3 GPA and with at least sophomore-level status (more than 7.75 earned course units)*. No permission will be granted for more than 20 credits or more than 5 courses in a given semester.

***BELOW FOR OFFICE USE ONLY***

**CUMULATIVE GPA:**

**EARNED UNITS TO DATE:**

**DECISION:**    **APPROVED** \_\_\_\_    **REJECTED** \_\_\_\_

**APPROVAL (Dean or Assistant Dean ONLY)**

Student is approved to enroll in 5 course units for FALL 20\_\_\_\_ or SPRING 20\_\_\_\_.

**Antonino Scarpati, Assistant Dean**

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

**COMMENTS: (optional)**