I. PROCEDURES

Fall/Spring/Summer Semesters
The maximum course load is nineteen (19) semester credit hours, unless permission for an overload is approved. The Dean of your major or designee must approve registration for an overload. Students with a cumulative ETSU GPA of 3.0 may be approved for a course load over 19 semester credit hours.

A. Student and/or advisor initiates process by obtaining request form from the Registration Office (Burgin Dossett, 102) or by obtaining the form online at www.etsu.edu/reg/forms.php
B. Advisor completes/recommends request to the dean of major or designee for review.
C. Dean/designee verifies the student has a cumulative ETSU GPA of 3.0 and may request a conference with the student to discuss this request.
D. Dean or designee approves or disapproves the request, notifies student, and (if approving) completes the form which is valid for seven working days after the date of the dean’s approval. Dean delivers completed request to Registrar’s Office for approval.

I. STUDENT COMPLETES THIS SECTION

Student’s Printed Name: ____________________________  ______________________
Last       First       Date

Student E Number: _______    Phone Number: _______     ETSU Email: _______@etsu.edu

Major: _________    Number Overload Hours Requested: _____     Term: Fall___Spring___Summer___

Reason for Requesting Overload:
_________________________________________________________________________________________
_________________________________________________________________________________________

Signed: ___________________________________________  __________________________
Student’s Signature       Date

II. ADVISOR RECOMMENDATION

Advisor’s Printed Name: ____________________________
Last       First

Recommendation: Yes__  No__    Comments: __________________________________________

Signature: ___________________________________________  __________________________
Advisor’s Signature       Date

III. DEAN OR DESIGNEE SIGNATURE APPROVAL

Approval: Yes__  No__    Comments: __________________________________________

Signature: ___________________________________________  __________________________
Dean or Designee Printed Name and Signature       Date
<table>
<thead>
<tr>
<th>Dean Category</th>
<th>Contact Person</th>
<th>Phone Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Undeclared (or Academic Focus Area) Students</td>
<td>University Advisement Center</td>
<td>423-439-5244</td>
</tr>
<tr>
<td>College of Arts and Sciences</td>
<td>Dr. Martha Michieka or Designee</td>
<td>423-439-5248</td>
</tr>
<tr>
<td>College of Business and Technology</td>
<td>Dr. Anthony Pittarese</td>
<td>423-439-6984</td>
</tr>
<tr>
<td>Clemmer College</td>
<td>Jessica Wang</td>
<td>423-439-7616</td>
</tr>
<tr>
<td>College of Clinical &amp; Rehabilitative Health Sciences</td>
<td>Ali Williams</td>
<td>423-439-7469</td>
</tr>
<tr>
<td>College of Nursing</td>
<td>Chelsey Mitchell</td>
<td>423-439-4319</td>
</tr>
<tr>
<td>College of Public Health</td>
<td>Dr. Robert Pack</td>
<td>423-439-4243</td>
</tr>
<tr>
<td>Division of Cross-Disciplinary Studies</td>
<td>Dr. Jill Leroy-Frazier</td>
<td>423-439-4223</td>
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Rev. 1/24/2022