



Registrar's Office
 501 Crescent Street
 New Haven, CT 06515-1355
 Phone: 203-392-5301
 Email: Registrar@SouthernCT.edu

Credit Overload Request

Full-time matriculated students with a cumulative 3.0 GPA or higher may request to register for more than 15 credits (graduate students) or more than 18 credits (undergraduate students) in any given term.

Student Information

Student ID: _____ Campus Email: _____
 Student Name: _____ Telephone: _____
 Term: Fall Winter Spring Summer Year: _____

Justification for credit overload this semester:

CRN: (ex. 12345)			
Subject: (ex. MAT)			
Course #: (ex. 100)			
Section: (ex. 01)			

By my signature below, I acknowledge that upon approval I will be registered for the courses above and assessed a NON-REFUNDABLE Excess Credit Fee for each undergraduate or graduate credit beyond 18 credits at a rate equal to the charge for one credit of course tuition and fees. I further understand that subsequently dropping any course on my registration, even if the total credits for undergraduate/graduate coursework falls below 18 credits, does not negate these fees.

Student Signature: _____ **Date:** _____

Students may [create a digital ID](#) using their SCSU email by clicking the signature block above, or the form may be accepted as an attachment from their SCSU email account.

To Be Completed by the Academic Advisor

Cumulative GPA: _____ Current # Registered Credits: _____
 Major: _____ Additional # Credits Requested: _____

I confirm that the student listed above meets the prerequisite for the course(s) requested.

Advisor Signature: _____ **Date:** _____

Dean Signature: _____ **Date:** _____

The Dean for the college or school where the course is offered must approve this request and must submit all approved forms to Registrar@SouthernCT.edu for processing.