

University of Hawai'i at Hilo
Student Overload Approval Form
Graduate Program

1. This form must be submitted by a classified graduate student who wants to take more than 15 credits for the fall or spring, or more than 12 credits for the summer semester.
2. All registration submission deadlines apply for processing of this request
3. Approval must be received by your primary advisor, program chair person, and the Graduate Division chair.

Student Name: _____ Student ID: _____

Student e-mail: _____@hawaii.edu Phone: _____

Petitioning Semester: Spring Fall Summer Year: 20____

Graduate Program: _____ Cumulative Graduate GPA: _____

Requested Maximum Credit Hours: _____

Student Signature: _____ Date: _____

Obtain Approval Signatures:

We certify the approval of the maximum credit hours indicated above.

Primary Advisor Name: _____

Advisor Signature: _____ Date: _____

Program Chair Name: _____

Program Chair Signature: _____ Date: _____

Graduate Division Chair Name: _____

Graduate Division Chair Signature: _____ Date: _____

Submit completed form to the Office of the Registrar for processing.

Office of the Registrar Use:

GPA Verified: _____ SFAREGS entered By: _____ Date: _____

Created: 07/2010