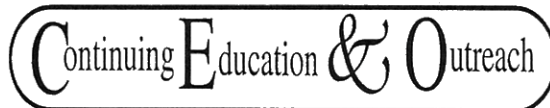




State University of New York



Non-Degree Advising Undergraduate Overload Request Form

Name, SSN, Date, Overload request for: Semester, Of 20 (S or F)

Total Credits Completed, Date expected to Matriculate

NOTE: THE MAXIMUM OVERLOAD REQUEST IS FOR 20 CREDITS BY THE APPROVAL OF THE NON-DEGREE ADVISING OFFICE.

Total number of credits you wish to carry (NOT to exceed 20 credits)

Courses for which you are currently registered:

- 1. 2. 3. 4.

Courses you wish to overload:

- 1. 2.

BASIS FOR YOUR REQUEST:

\*\*\*\*\*

Name, SSN

Your overload request for credits is APPROVED / DENIED.

Non-Degree Advising Signature, Date