THE MOMENT OF DISCOVERY

EUREKA COLLEGE
FOUNDED 1855

REQUEST FOR ACADEMIC OVERLOAD

NAME: _____
          LAST   FIRST   MIDDLE

SONIS ID: _____

CURRENT GPA: _____   MAJOR 1: _____

MAJOR 2: _____   MINOR: _____

COURSE ID: _____   COURSE TITLE: _____

ACADEMIC YEAR: _____   SEMESTER: FALL   SPRING   SUMMER

RATIONALE:

REQUIRED SIGNATURES:

Student: _____ Date: _____

Advisor: _____ Date: _____

Division Chair (Major 1):   _____ Date: _____

Division Chair (Major 2):   _____ Date: _____

Provost: _____ Date: _____

Records Office: _____ Date: _____

Return completed form to the Records Office.