Students who wish to register for more than 9 credits for graduate programs or more than 12 credits for undergraduate programs in the Fall or Spring semester, or more than 6 credits for graduate or undergraduate programs in the Summer sessions must complete a course overload form. For graduate programs a minimum CGPA of 3.5 and for undergraduate programs a minimum CGPA of 3.0 is required to become eligible. The student must obtain an approval signature from their academic advisor as well as the dean of the appropriate school, and submit the form to the Registrar’s Office prior to the end of the add/drop period. Students must be in a good academic standing to request for a course overload. The school dean has the authority to approve or deny the request.

A: To be completed by student

Student’s Name: ___________________________________________ VIU ID#: ____________________
(Last) (First) (Middle)
Phone: ____________________ VIU E-mail: ______________________@campus.viu.edu

Program of Study: ________________________________________

Semester for which overload is requested: ___________________ Total Requested credits: ___________

List all courses you request to take in the semester (course code & course name):

1) __________________________ (On ground / Online) 4) __________________________ (On ground / Online)
2) __________________________ (On ground / Online) 5) __________________________ (On ground / Online)
3) __________________________ (On ground / Online) 6) __________________________ (On ground / Online)

Reason for Request:
___________________________________________________________________________________________
___________________________________________________________________________________________

Student’s Signature: ___________________________ Date: ____________

B: To be completed by academic advisor and school dean

Previous Semester GPA ________ Cumulative GPA ____________

☐ Approved ☐ Denied

Justifications:
___________________________________________________________________________________________
___________________________________________________________________________________________

Academic Advisor’s Signature: ___________________________ Date: ____________

School Dean’s Signature: ___________________________ Date: ____________