

Complete and return this form to:
University of Rochester - Simon Business School
Office of the Registrar
245 Gleason Hall
registrar@simon.rochester.edu
Phone: (585) 275-3533 / Fax: (585) 271-3907



COURSE OVERLOAD/UNDERLOAD FORM

Directions

- Please complete this form for permission to take a course overload or underload. Only 1 course overload is allowed for part-time students.
- You must receive the approval signatures below before you submit this form to the Registrar's Office for processing. A course overload or underload for the quarter may affect your financial aid, visa status and/or your graduation term.

Student Name: _____ **UID#:** _____
Please print Last First MI

Student Signature: _____ **Date:** _____
month/day/year

Program: _____ **E-mail:** _____

Advisor's Signature: _____
Date Print Name

Quarter: Fall Winter Spring Summer Academic Year: _____

Overload:

- Full-time Students: Check this box if this increases your credit load to over 12 hours for the quarter.
- Part-time Students: Check this box if this increases your credit load to over 6 hours for the quarter.

List the courses you plan to take this quarter: _____

Underload:

- Full-time Students: Check this box if this decreases your credit load to less than 9 hours for the quarter (12 for those enrolled in pre-fall & fall quarters combined).
- Part-time Students: If you plan to decrease your credit load to 0 hours for the quarter, you must work with your Advisor to submit a Change of Status to Leave of Absence or Withdrawal from School.

List the courses you plan to take this quarter: _____

Registrar's Office Use Only

Revision: 11/2016

Date Received: _____ Date Processed: _____ By: _____ No hold: _____ Over/under load noted: _____