



Office of University Registrar  
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Dartmouth, MA 02747

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**REQUEST FOR COURSE OVERLOAD (IN EXCESS OF 18 CREDIT HOURS)**

1. List Course(s) for which you are now registered (up to 18 credit hours including Independent Study, Directed Study, and any Experience Program Course).

Course/Section	Course Title	Credits	Instructor
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

2. List Course(s) requested as overload (including Independent Study, Directed Study and any Experience Program Course). If the request is approved and the course is open it will be added to your schedule and you will be notified. If the course is not open, you will also be notified. If not approved, the course(s) will not be added to your schedule and you will also be notified.

Course/Section	Course Title	Credits	Instructor
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**NOTE:** All changes made during the add/drop period must have the approval of the Dean of the College.

Semester: \_\_\_\_\_

Student Name: \_\_\_\_\_

College: \_\_\_\_\_

Major: \_\_\_\_\_

Student Id Number: \_\_\_\_\_

Class: (Year of Graduation) \_\_\_\_\_

Approved: \_\_\_\_\_

Signature, Dean of the College

**NOTE:** This form is to be left in the Registrar's Office.