

REQUEST FOR EXCESS UNITS

Name _____ CWID _____
 Phone (_____) _____ Email _____
 Major _____ Class level _____

Policy

A student whose academic record justifies a study list in excess of 4 units may request to enroll for up to 2 additional units. In general, only students with superior academic records are allowed to enroll for more than the maximum. In addition, the need to enroll for the extra study must be established. Factors such as time spent in employment or commuting, the nature of the academic program, extracurricular activities and the student's health should be considered in planning a study program.

A student's request to enroll for more than 4 units must be approved by the **student's advisor and the department chair of the major.**

For Undergraduates: Student must provide a typed statement and TDA when submitting this form.

For Graduates: Student must provide a typed statement and unofficial transcript when submitting this form.

Undeclared majors must receive the approval of the Assistant Director of Academic Advisement in UH-123. If the request is denied, an appeal may be made to the appropriate college dean.

Note for CSUF Students:

CSUF students are encouraged to register and pay for their first class (up to 4 units) during their priority registration period. Registration for an additional class (up to 6 units) begins on Thursday, October 19 and first requires in-person submission of the approved Request for Excess Units form to the Admissions and Records Service Center in LH-114 for processing.

Completed form must be submitted in person at LH-114

Dates for submission:

Session A: 10/19/17 – 12/20/17

Session B: 10/19/17 – 1/4/18

I wish to register for a total of _____ units in the Winter Session 2018 term.

Cumulative GPA _____ (Refer to your TITAN Online account for GPA)

Reason for request: _____

Student Signature _____ Date _____

Approval signature(s) are required and boxes must be checked for approval or denial.

Comments:

 Print Advisor Name

 Print Department Chair Name

 Signature of Advisor

Date

 Signature of Department Chair

Date

Approved Denied

Approved Denied