



School of Social Work

Overload Approval Form

** Minimum G.P.A. of 3.5 is required to apply. Please fill out, sign and return to Jen Warner, Registrar at Jarose@bu.edu or room 114.*

Name: _____ BU ID#: _____

Email: _____@bu.edu Current Campus: _____

Are you: Dual Degree Advanced Standing Neither

Semester: Fall _____ Spring _____

Reason for Overloading: _____

Courses you are seeking approval for: *(please list all courses you intend on taking for the semester)*

| <u>College</u> | <u>Department</u> | <u>Course Number</u> | <u>Credit #</u> |
|----------------|-------------------|----------------------|-----------------|
| (Ex: SSW) | (Ex: CP/MP) | (Ex: 759 A1) | |
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Total Credit Hours: _____

Student Signature

Date

Associate Dean for Academic Affairs Signature