Exceed 17 Hour Limit Request Form

Circle one: Fall Spring Summer I Summer II Year: _______________

<table>
<thead>
<tr>
<th>Last Name</th>
<th>First</th>
<th>Middle</th>
<th>WFU ID Number</th>
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**Request to Exceed a 17 credit hour load for the term:**
Addition of a class that will result in a student exceeding 17 hours requires permission from an appropriate dean; exceeding 18 hours requires additional permission of the Committee on Academic Affairs (CAA).
Hours BEFORE requested change: ________ Hours AFTER requested change: ________

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**REQUIRED APPROVALS:**

_________________________________________ Date: __________________________
Advisor’s Signature

_________________________________________ Date: __________________________
Office of Academic Advising Approval

NCAA Athletes ONLY: ____________________________________________________
Athletic Counselor’s approval