

**UNIVERSITY OF ARKANSAS**  
*Dale Bumpers College of Agricultural, Food, and Life Science*  
*Office of the Dean*

**PETITION TO TAKE AN OVERLOAD (21 hours or less)**

Requests for more than 21 hours require Registrar approval.

Please complete the Overload Petition for Undergraduate Students form on the Registrar's website.

Name: _____	ID#: _____
E-Mail: _____	Phone #: _____
Total Hours Requested: _____	Cumulative GPA: _____
Overload Term: _____	Date: _____

**Current Schedule of Classes**

(Example: ANSC 1032 Intro Animal Sciences)

_____	_____	_____	_____	_____	_____
Subject	Catalog Number	Section	Subject	Catalog Number	Section
_____	_____	_____	_____	_____	_____
Subject	Catalog Number	Section	Subject	Catalog Number	Section
_____	_____	_____	_____	_____	_____
Subject	Catalog Number	Section	Subject	Catalog Number	Section
_____	_____	_____	_____	_____	_____
Subject	Catalog Number	Section	Subject	Catalog Number	Section

**Classes Requested to be Added**

(Example: ANSC 1032-001: Intro Animal Sciences, Class #3614)

_____	_____	_____	_____	_____	_____
Subject	Catalog Number	Section	Subject	Catalog Number	Section
_____	_____	_____	_____	_____	_____
Subject	Catalog Number	Section	Subject	Catalog Number	Section

Reason for Overload:

Recommendations of Student's Advisor:

Student's Signature	Date
Advisor's Signature	Date

**Please return this form to the Bumpers College Dean's Office – AFLS E108.**

Received By: \_\_\_\_\_  
 Date: \_\_\_\_\_

Dean's Office Use Only

Processed By: \_\_\_\_\_  
 Date: \_\_\_\_\_