



Exceed Maximum 18 Credit Limit Appeal

Name _____ Student I.D. _____
Last Name First Middle

Address _____

City _____ State _____ Zip _____

Phone (h) _____ (w) _____ (c) _____

Program/Major: _____

Semester: _____ Number of Credits Requested: _____

Reason/explanation (attach additional pages if necessary):

Student's Signature

Date

Do not write below this line

<p>_____ Current GPA</p> <p>_____ Attempted/Earned Credits</p> <p>_____ Previous Probation (s)</p> <p>_____ Previous Suspension (s)</p>	<p>Recommendation</p> <p>___ Approved*</p> <p>___ Approved with conditions*</p> <p>___ Not approved*</p> <p>_____ Registrar or Counselor</p> <p>_____ Date</p>
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*Conditions/Remarks:

