

Andrews University  
 Affiliation site: University of the Southern Caribbean  
**APPLICATION FOR CREDIT OVERLOAD**  
 Required: Please attach Completed Drop Add Form  
 (Please indicate all dates in the following sequence (mm-dd-yr))

Semester [ ] 1 <sup>st</sup> [ ] 2 <sup>nd</sup> [ ] Summer				
First name:	Middle	Last Name	USC ID	AU ID
Anticipated Graduation Date: [ ] May [ ] December conferral			School year: 20__/20__	
Email:		Fax:	Phone no:	
Course Number:	Title:	Credits__	AA Year	
Reason:				

THIS SECTION TO BE FILLED BY ADMISSIONS COUNSELOR

Admissions:	Admissions Lack:	Agreement year
Provisional <input type="checkbox"/>	USC Transcript <input type="checkbox"/>	1998 <input type="checkbox"/>
Regular <input type="checkbox"/>	CXC/GCE Math <input type="checkbox"/>	2001 <input type="checkbox"/>
P.T.C <input type="checkbox"/>	CXC/GCE English <input type="checkbox"/>	2003 <input type="checkbox"/>
Major:	CXC/GCE Biol <input type="checkbox"/>	2006 <input type="checkbox"/>
Minor:	Official Certs. <input type="checkbox"/>	ETT <input type="checkbox"/>
Emphasis:		

Admission validated by counselor's signature to be true and correct by Andrews University.	
Signature: Admissions Counselor _____	Date: _____

GPA:		
Current Load	GPA Validated to be true and correct by Data Entry Signature _____	Date: _____

OFFICER	DECISION	SIGNATURE	DATE
ADVISOR	Approved <input type="checkbox"/> Denied <input type="checkbox"/> Hold <input type="checkbox"/>		
FACULTY DEAN	Approved <input type="checkbox"/> Denied <input type="checkbox"/> Hold <input type="checkbox"/>		
VICE PRESIDENT	Approved <input type="checkbox"/> Denied <input type="checkbox"/> Hold <input type="checkbox"/>		
Received by Data Entry on: _____		Bender windows Entry Record Date _____	
Signature and Stamp _____		Total Load Before Transaction _____ AFTER _____	