

HOBART AND WILLIAM SMITH COLLEGES

Unusual Course Load Request

Unusual course loads can be only taken with permission of the Committee on Standards. Requests should be submitted no later than registration for the semester requested.

STUDENT NAME _____ P.O. BOX _____ CLASS _____

NUMBER OF COURSES REQUESTED ____ ADVISOR _____ FOR _____ SEMESTER

Please indicate with an * which course you consider to be your fifth choice.

_____ Title _____

_____ Title _____

_____ Title _____

_____ Title _____

_____ Title _____

_____ Title _____

Give reason for unusual course load (use reverse side if needed):

NOTE: Taking a fifth course in any semester does not alter your commitment to take a minimum of four courses each semester.

Date of Request

Student Signature

Date

Dean's Signature