

**EAST TENNESSEE STATE UNIVERSITY  
SCHOOL OF GRADUATE STUDIES**

**Application for Graduate Course Overload**

**TO:** Dean, School of Graduate Studies

**FROM:** Committee Chair or Graduate Coordinator

Date \_\_\_\_\_

I recommend approval for:

Student Name (Type or print) \_\_\_\_\_ E# \_\_\_\_\_

to enroll for \_\_\_\_\_ hours of credit for the \_\_\_\_\_ semester of year \_\_\_\_\_

The student is:

A Graduate Assistant  not a Graduate Assistant

Department (if Graduate Assistant) \_\_\_\_\_

Justification

Chair, Advisory Committee or Graduate Coordinator (please type or print) \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Dean, School of Graduate Studies: \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Approved  Denied

**cc: The Registrar**