Return form to the registrar's office at psu-registrar@plymouth.edu.

Undergraduate Credit Overload Request for Winterim & Summer 2025

Last Name_____ First Name_____ Student ID_____

Cell Phone #_____ # Credits Over the Maximum_____

Degree: _____BA _____BS _____BFA _____Certificate Term: _____Winterim _____Summer Year_____

Major_____ Option_____

Major_____ Option_____

Cumulative GPA_____ (will be verified by registrar's office_____)
initials/date

Please see Student Financial Services for details on tuition and fees for summer and winterim courses.

Once processed by the registrar's office, you will need to register yourself via myPlymouth for the course(s).

Student Signature_____ Date_____

The signatures of Advisor and Academic Student Advocate are **required only if**:

1. The winterim student has a GPA of less than 2.33 and is seeking to take 8 or more credits
2. The summer student is seeking to take more than 18 credits

Signature below indicates that I am in support of the student's plan as noted above.

Advisor Signature	**Print Name**	**Date**
Academic Student Advocate Signature	**Print Name**	**Date**

Processed by: _____ Date_____ 12/2024

Office of the Registrar 17 High St, MSC #7 Plymouth, NH 03264 Phone: (603) 535-2345, Fax (603) 535-2724