REQUEST FOR REGISTRATION
OVER 17 CREDIT HOURS

<table>
<thead>
<tr>
<th>NAME</th>
<th>ID#</th>
<th>DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>E-MAIL ADDRESS</th>
<th>SPO</th>
<th>PHONE</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

YEAR IN SCHOOL: (circle one)  Senior  Junior  Soph.  Fresh.  Special

The average annual class load for full-time students is 33 semester hours. This includes courses taken during the fall semester, January term, and spring semester. Only students with a grade point average of 3.00 should consider a class load in excess of 17 hours for a semester.

Extra hours charges are assessed in the spring semester for each hour of credit attempted in excess of 36 hours for the year (Fall + January + Spring). Please refer to the Financial Services website at: https://www.luther.edu/financial-services/student/ for additional information about the extra credit hours calculation.

Applied music lessons, class music or piano lessons, vocal coaching, Intersections 130, the first HLTH 100 (Wellness), and the first Physical Education 110 skills course are not included in the 36 hours.

TERM FOR WHICH I WISH TO APPLY: ___________________________

HOURS CURRENTLY ENROLLED: ___________________________

(Please note credit hours do not include music lessons)

PLUS HOURS IN MUSIC LESSONS: ___________________________

COURSE(S) THAT I WISH TO ADD TO MY SCHEDULE: ___________________________  CR: ___________________________

_________________________  CR: ___________________________

REASON(S) FOR TAKING MORE THAN 17 HOURS: _____________________________________________________________
____________________________________________________________________________________________________________
____________________________________________________________________________________________________________
____________________________________________________________________________________________________________
____________________________________________________________________________________________________________

Student’s signature ___________________________  Date ___________________________

Adviser’s signature ___________________________  Date ___________________________

☐ Your application is approved.

☐ Your application has been approved but the course is CLOSED. Please contact your academic advisor.

☐ Your application has not been approved because __________________________________________________________.

Registrar Approval ___________________________  Date ___________________________

Updated 1/19