

Stirling Theological College

Overload Application Form

Section A. Student's Personal Details

Last Name _____

Given Names _____

Telephone (BH) _____

Course Title: _____

Section B: Requested Period

Overloading requested for: Semester _____ Year _____

List all units you plan to study this semester:

<i>Unit Code</i>	<i>Unit Name</i>	<i>Points</i>	<i>Start Date</i>	<i>End Date</i>

Section D: Student Declaration

I understand that

- I may not apply for special consideration or request extensions due to overloading
- I must continue to make satisfactory progress when overloading

- (Overseas Student Visa holders only) I understand that I must complete my course within the expected duration as stated in the Confirmation of Enrolment

Student Signature: _____ Date: _____

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Section E: Coursework Co-ordinator section

(Coursework Coordinator to complete)

- the student is not in the first semester of the enrolled course
- the student has achieved an average of 'Credit' or above in their previous year in this course
- I approve the course of study detailed in Section C above
- I do not approve the course of study detailed in Section C above.

(Please tick one box only)

Coursework Co-ordinator Signature: _____

Date: / /