

University of Denver, College of Law
PETITION - OVERLOAD

Information to be completed by student

NAME: _____ Banner ID #: _____

Phone Number: _____

Year in Law School _____ Sem _____ Division _____ Day _____ Eve _____ Hours Employed per Week _____

REASON FOR REQUEST:

Good cause must be shown. Attach additional pages and supporting documents as may be necessary to show good cause. Please list current class schedule.

I will be working _____ hours per week. **Please note:** Overload petitions will not be approved if you are a day student working more than 20 hours a week. This is an ABA requirement.

Student Signature: _____ Date: _____

PETITION: **APPROVED** _____ **DISAPPROVED** _____

Dean for Student Affairs

Date

COMMENTS: _____

