STANTON UNIVERSITY
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Extra Unit Authorization or Graduate Students

Through the first week of each term, students in their last quarter and students in good standing may enroll in a maximum of 13 units; Graduate students wishing to attempt additional units must obtain the required signatures of approval outlined below on this form. The student will have to meet with the International Student Advisor to shorten their program end date. **This form, with all necessary signatures, must be filed with Admissions and Records before adding extra units.**

PRINT CLEARLY ***(form will not be processed if illegible)***

Name: _____ Student ID: _____

Term: _____ Year: _____ Major: _____

Phone: _____ email: _____

Your class level: ◯ 1st Year ◯ 2nd Year

How many units are you currently enrolled in? _____

How many additional units are you requesting? _____

Have you applied for graduation? _____

Number of units completed toward your degree: _____

If yes, when do you expect to graduate? _____

GPA: _____ Cumulative GPA: _____

Additional planned course work:

Department	Course Number	Course Title	Units

Office Use Only

Students in Good Standing- Maximum 13 units

Graduate students requesting to take more than their designated unit limit must obtain the signature approval from registrar and then the Dean. If approved, submit the signed form to Admissions and Records.

☐ Recommend approval for_____additional units, total of_____units. ☐ Recommend denial.

Registrar Signature_____Print Name_____ Date _____

☐ Recommend approval Estimated last quarter_____ ☐ Recommend denial

International Advisor signature _____ Print Name_____Date _____

☐ Approved for_____additional units, total of_____units. ☐ Request denied

Dean Signature:_____Date _____

Students in last quarter– Maximum 13 units

Graduate students in their last quarter are first required to seek academic advisement and signature approval from Register and then the Dean. If approved, submit the signed form to Admissions and Records.

☐ Recommend approval for_____additional units, total of_____units. ☐ Recommend denial.

Registrar Signature_____Print Name_____ Date_____

☐ Recommend approval Estimated last quarter_____ ☐ Recommend denial.

International Advisor signature _____ Print Name_____Date _____

☐ Approved for_____additional units, total of_____units. ☐ Request denied

Dean Signature:_____Date_____