

THE UNIVERSITY OF AKRON SCHOOL OF LAW
REQUEST FOR DEVIATION FROM STANDARD CREDIT HOUR LOAD

Date: _____

Student's Printed Name: _____ ID#: _____

E-mail: _____

Cell Phone: _____

Current Law GPA: _____ Mailbox# _____

Current Classification: FT-1 FT-2 FT-3
PT-1 PT-2 PT-3 PT-4

Division	Minimum Credits For Fall or Spring (unless otherwise authorized)	Maximum Credits For Fall or Spring (unless otherwise authorized*)	Summer enrollment is not required beyond the 1 st year. Summer enrollment is recommended for part-time students in order to stay on track with graduation.	Maximum Credits For Summer (unless otherwise authorized)
Full-Time	12	16*	More than 3 credits during any summer session would result in an overload and must be approved.	6 (9 if no course overlap**)
Part-Time	8	10		6 (9 if no course overlap**)

*No overload in excess of 17 credits can be approved per ABA Standards.

**No overload request required. A 9 hour summer load will be authorized providing there is no course overlap.

I request permission for: (check one) _____ OVERLOAD of credits _____ UNDERLOAD of credits

Term for which load deviation is being requested: _____

Number of hours you will be employed per week during this requested term: _____

Number of hours you will be studying outside the classroom per week during this requested term: _____

According to ABA Standards for Approval of Law Schools, Standard 304(f): No full- or part-time student may be employed more than 20 hours per week in any week in which a student is enrolled in more than twelve class hours.

List course title, number, and credits for each course you will be taking if the overload/underload is approved. Also list graduate and undergraduate courses, if applicable.

Course Title	Course Number	Course Beg. & End Dates	Credit Hours

Total Credits Enrolled: _____

Compelling Reason for the Deviation Request: _____

I understand this approval is based on the above listed courses and hours of employment. Any changes made to my course schedule or employment hours must be reported and subsequent approval obtained.

Student's Signature: _____ Date: _____

DEAN'S APPROVAL

The above courses are approved in accordance with the policies & procedures in the Student Handbook and information contained on this application form.

Assistant Dean of Student's Signature: _____ Date: _____