

國立清華大學 超修申請表 Overload Application

學期：_____學年度(year) 第_____學期 (Spring/Fall)

學號 Student No.		系別 Department	
姓名 Name		手機或電話 Mobile/TEL	
上學期學業成績平均 (請檢附成績單 Average grade in the previous semester (please attach one copy of the transcript)			
本學期擬修習總學分 Intended credit amount			
導師簽名 Advisor's signature			
系(班)主任簽名 Department director's signature			

1. 學士班學生因特殊原因，經導師及系主任同意，得修習超過 25 學分。
2. 本表格須於行事曆加退選截止日前，繳交至課務組。
 1. Students must not take more than 25 credit each semester.
 2. If he/she has any special reason, overload Application is now possible with the permission of the advisor and the department Director.
 3. This application form should be delivered to the Office of Curriculum before the deadline of Add-or-Drop Selection.