

## **SLU LAW** Request to Take Under 8 Credit Hours

## Please complete all information and submit to the Dean of Students.

Name:		Ва	nner ID:	Semester:	
Total Hours Completed:			Proposed Graduation Date:		
List Courses for this semester:		:		Credit Hours:	
Total Credit	t Hours for Semest	er:			
Why do you	u wish to take less	than 8 credit hours?			
Which cour	se(s) would you a	dd if request is denied	?		
Action:	Granted	Denied	Other		
Comment:				<u>-</u>	
Dean of Stu	ıdents' Signature:				
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