

Leech Lake Tribal College Student Request for Credit Overload

Date:	SSN:	
Student:		
Last	First	MI
Registrar's Office:		
Cumulative GPA:	Current Credit Count	Number of Credits Requested
Approved: Yes No		
		Registrar Signature
If no, reason:		
Financial Aid Office:		
Sufficient Funds Available	e: Yes No Approved: Yes No	
If no. reason:		Financial Aid Director Signature
Dean of Instruction:		
Journ of motivation.	, pp. 61 ca. 125 116	Dean Signature
If no. reason:		•
LEEGE SOUTH OF THE STATE OF THE		
*	Leech Lake Tribal Col	llege
	Student Request for Credit C	S .
Date:	SSN:	
Student:		
Last	First	MI
Registrar's Office:		
Cumulative GPA:	Current Credit Count	Number of Credits Requested
Approved: Yes No		
		Registrar Signature
If no, reason:		
Financial Aid Office:		
Sufficient Funds Available	e: Yes No Approved: Yes No	
		Financial Aid Director Signature
If no, reason:		
Dean of Instruction:	Approved: Yes No	
		Dean Signature
If no, reason:		