

**Guilford Technical Community College**  
PO Box 309, Jamestown, NC 27282

**Request for more than 10 Credit Hours**

Date:

Student Name:

Student ID Number:

Current Program:

Current Cumulative GPA:

Current Program GPA:

Course Requested:  
(include the course code and section number)

Semester:

Reason for Request:

---

Student Signature

Date

Approved: \_\_\_\_\_

Denied: \_\_\_\_\_

---

AVPI Signature

Date

Please submit the completed form to the Office of the Associate Vice President of Instruction and at 4209 Medlin Campus Center, Jamestown Campus or e-mail to: Sierra Graham [slgraham@gtcc.edu](mailto:slgraham@gtcc.edu); Dr. Jeremy Bennett [jdbennett5@gtcc.edu](mailto:jdbennett5@gtcc.edu)