



Additional Unit Authorization for Graduate and Credential Students

OFFICE OF THE REGISTRAR • STUDENT SERVICES BUILDING 47•100 CAMPUS CENTER • SEASIDE, CA 93955
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Instructions: This form is used to request additional units beyond the maximum allowed per semester.

1. Complete all parts of form.
2. Obtain advisor/program coordinator approval via CSUMB email
3. Submit completed form and advisor approval to the Office of the Registrar via CSUMB email

Part 1: Student Information

Student ID	Last Name	First Name
Phone Number	E-mail Address	

Part 2: Term and Class Information

REGISTRATION TERM: _____

MAJOR: _____

UNITS CURRENTLY ENROLLED IN: _____

COURSES REQUESTED:

Subject (Ex. Kin)	Course Number (Ex. 100)	Course Units

TOTAL UNITS TO BE ENROLLED IN: _____

Part 3: Student Signature

STUDENT SIGNATURE or typed name: _____ **DATE:** _____

DEPARTMENT USE ONLY			
Advisor/Coordinator Signature:	Date:	Approve	Deny
REGISTRAR'S OFFICE USE ONLY			
Processed by:	Date:		