

Submit the completed form to the Office of the Registrar, Esch Hall 131. The committee reviews petitions on a monthly basis. Please submit your materials by the 25<sup>th</sup> of the month in order to ensure review for the next month. Once the petition has been submitted, you will be notified of a decision within 4-6 weeks.

**INSTRUCTIONS:** Please type a formal statement of your request (one request per form) and submit it along with this form (only **typed** statements will be considered). Be brief. Please provide the following:

- 1) An exact statement of the special privilege, exemption, or other petition you want to make.
- 2) A statement of the reasons for your request. Include any pertinent facts or supporting documents that might help the committee make a decision (e.g., course syllabi, catalog descriptions, program descriptions).
- 3) Your signature, complete address, and telephone number.
- 4) The appropriate signatures and recommendations (see below).
- 5) Letters of support (optional).

**FOR MAJOR/MINOR REQUIREMENTS:** *Exceptions to requirements for a major or minor do not need to be presented to the Academic Petitions Committee.* These requests are to be made to the department chair, program director or dean, as appropriate.

**FOR GENERAL EDUCATION CORE REQUIREMENTS:** Exceptions to general education core requirements must have the signature of the department chair, program director, or dean in the department in which the course is housed (e.g., for an exception/substitution for a communication course, the Communication Department chair must be consulted).

**If this petition is approved, it is your responsibility to act upon it by contacting the appropriate office(s).**

Name \_\_\_\_\_ Student ID # \_\_\_\_\_  
Last First Former

Address \_\_\_\_\_  
Street City State Zip

Preferred Phone Number \_\_\_\_\_ Student Email Address \_\_\_\_\_

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

Advisor's Name & Signature \_\_\_\_\_ Date \_\_\_\_\_ Recommended: (yes/no/abstain)

\*Dean's/Chair's Signature \_\_\_\_\_ Date: \_\_\_\_\_ Recommended: (yes/no/abstain)

\*Dean's/Chair's Signature \_\_\_\_\_ Date: \_\_\_\_\_ Recommended: (yes/no/abstain)  
 (or other school or department from which input on the decision is required)

*\*For an exception to a university policy, signature of your school dean or department chair is required.*

*For an exception to a school or department policy, signature of dean or chair of that school or department is required.*

The university maintains the privacy of the information included in this appeal. However, this information is not confidential, and may be shared by the Registrar's Office with other campus offices as necessary [including the SIT and the Title IX Coordinator]. Thus, when completing the appeal, students should be mindful that the information they disclose may be shared and that the university may follow-up with the student, when appropriate.

**For Registrar's Office use only**

GPA \_\_\_\_\_  
 Earned hours \_\_\_\_\_  
 Transfer hours \_\_\_\_\_  
 Last term enrolled \_\_\_\_\_  
 Major \_\_\_\_\_  
 College/School \_\_\_\_\_

Decision Date \_\_\_\_\_ Approved \_\_\_\_\_ Rejected \_\_\_\_\_

Student & advisor notification date \_\_\_\_\_

Sent to committee on \_\_\_\_\_