

# Petition for Exception

To: The Academic Petitions Committee

Date \_\_\_\_\_

Name \_\_\_\_\_  
Last First

Student ID \_\_\_\_\_

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

Telephone \_\_\_\_\_

Major \_\_\_\_\_

Term Requested \_\_\_\_\_

Email \_\_\_\_\_

I would like to petition for the following (choose all that apply)

- Return to an earlier catalog for graduation purposes. Please indicate the catalog to which you want to return \_\_\_\_\_ Is this request for your major, for general education, or for both? \_\_\_\_\_
- Additional repetition of courses beyond the total allowable limit (28-units total: 16 Forgiveness & 12 Averaged)
- Repetition of courses beyond third attempt
- \$ GGLWLRQDO ZLWKGUDZDO XQLWV 3:1 JUDGE UNIT QUALIFIED WKH VHPHVWHU XQ

On a separate sheet(s), please give the details and justification for your request. Be sure to address all of the guidelines for your particular petition. If any part of your request deals with immediate graduation issues, you must attach a copy of your graduation response. **IMPORTANT!** All letters accompanying petitions must be typed and addressed to the APC. Handwritten letters will not be accepted, nor will our office accept petitions written with grammatical, syntactical, spelling and other errors.

Signature of Student: \_\_\_\_\_

Recommendation of Faculty/ Advisor L Q Z K L F K S H W L W (REQUIRED) P D M R U I D O O V

Support  ' R Q 1 W V K S C o m m e n t s: \_\_\_\_\_

Faculty/Advisor Signature: \_\_\_\_\_ Date Signed: \_\_\_\_\_

Printed Faculty/Advisor name: \_\_\_\_\_

Academic Petitions Committee Action: Approved  Denied

Date: \_\_\_\_\_

Comments: \_\_\_\_\_