

ADMINISTRATIVE PROCEDURES PETITION FORM

NAME (LAST, FIRST, M.I.)		Student ID#				
E-MAIL ADDRESS						
LOCAL ADDRESS	STREET	CITY	STATE	ZIP		
LOCAL PHONE NO.	EXPECTED GRADUATION DATE	MAJOR	DATE PETITION INITIATED			
INSTRUCTIONS	LIMIT EACH PETITION FORM TO A SINGLE REQUEST - TYPE OR PRINT, AND USE BLACK INK.					
	BE SPECIFIC AND CLEAR IN YOUR REQUEST, I.E. SPECIFY COURSE(S) BY NAME AND NUMBER					
	IT IS THE RESPONSIBILITY OF THE STUDENT TO COMPLETE THE PETITION, OBTAIN THE NECESSARY SIGNATURES AND SUBMIT THE FORM TO THE OFFICE OF THE REGISTRAR, ROOM 201, TWAMLEY HALL.					
	IF APPROPRIATE, ATTACH ADDITIONAL DOCUMENTATION TO THE PETITION.					
ACTION REQUESTED (Be Specific):						
WHY COMMITTEE SHOULD APPROVE YOUR REQUEST (Be Specific):						
STUDENT SIGNATURE: _____						
				RECOMMENDATION		
	JUSTIFICATION OF RECOMMENDATION	SIGNATURE	DATE	APPROVE	DIS- APPROVE	NONE
ACADEMIC ADVISER						
INSTRUCTOR OF COURSE						
DEPT. CHAIR OF COURSE						
DEAN OF COURSE						
STUDENT'S ACADEMIC DEAN						
ACTION:			SIGNATURES REQUIRED:			
Extension of time to remove an incomplete:			Instructor, Dept. Chair, Dean of Course			
Changes or Drops after deadline:			Adviser, Instructor, Dept. Chair, Dean of Course, Student's Dean			
Total Withdrawal after deadline:			Adviser, Chair of Student's Major, Student's Dean			
Questions regarding all other types:			Contact the Office of the Registrar.			

COMMITTEE'S ACTION: APPROVED DISAPPROVED OTHER _____

DATE _____