



Undergraduate Student Petition

Name _____ CSU ID _____
Street Address _____ Date Submitted _____
City/State/Zip _____ Last Semester Attended _____
Daytime Phone Number _____ Major _____
Credit hours earned _____ GPA _____ Email _____

Purpose of Petition (check one):

- Registration Overload (18+ hours)
- Extension of Incomplete (course/term) _____
- Late Withdrawal (course/term) _____
- Late Registration (list courses & section numbers on back)
- Waiver of College requirement: _____
- Substitution of unapproved course/s (list courses and requirements on back)
- Other (specify): _____

It is your responsibility to obtain instructor's comments, if needed.

Recommendation of advisor or instructor:

Signature: _____ Date: _____

Decision of Academic Standards Committee:

Signature: _____ Date: _____

If you are enrolled at CSU this semester, please specify below by course number and section number, the courses for which you are registered.

_____	_____	_____
_____	_____	_____

Attach a typed statement or use the space below to describe your request and specify the reasons you feel your petition should be approved. Include any information that will help the committee understand your request.

Documentation of extenuating circumstances must be provided in order for these to be considered in reviewing your petition.

Student Signature _____ Date _____