

# ACADEMIC PETITION

Name: \_\_\_\_\_ UID#: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Last First M.I.

Address: \_\_\_\_\_  
Street & No. Apt. No. City State Zip

First Term at CSU: \_\_\_\_\_ Year: \_\_\_\_\_ Last Term Enrolled: \_\_\_\_\_ Year: \_\_\_\_\_  
(INDICATE FALL, SPRING OR SUMMER TERM AND YEAR)

Check One:  Male  Female

Daytime Tel. No.: Area Code: \_\_\_\_\_ Number: \_\_\_\_\_

Evening Tel. No: Area Code: \_\_\_\_\_ Number: \_\_\_\_\_

REQUEST APPLIES TO:  
Term: \_\_\_\_\_ Yr. \_\_\_\_\_

STATE BELOW, AS BRIEFLY AS POSSIBLE, WHAT YOU ARE REQUESTING AND WHY  
- Attach copies of any memoranda, letters or other documents to support your petition -  
DOCUMENTS BECOME PART OF YOUR ACADEMIC RECORD AND WILL NOT BE RETURNED

\_\_\_\_\_  
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(Read carefully before signing)

I have read the University catalog which was in effect when I enrolled at CSU. I clearly understand the standards that are stated inside the catalog. I believe that the request stated above is reasonable within the limits of these standards. I further understand that a decision will be mailed to me within a two to six week period, or longer, depending upon the volume of petitions received and major University events, i.e., Registration, Grade Processing.

Student's Signature \_\_\_\_\_ Date: \_\_\_\_\_

Faculty Approval: \_\_\_\_\_ Date: \_\_\_\_\_

Dean's/Chair's Signature \_\_\_\_\_ (If Required) Date: \_\_\_\_\_

For Office Use Only

ACTION TAKEN: \_\_\_\_\_ Approved \_\_\_\_\_ Denied \_\_\_\_\_ Deferred \_\_\_\_\_ Referred (See Below)

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

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