

College of Education Academic Petition

Deadline: Academic Petitions submitted to Licensure Services by the last day of the month will be reviewed by the Admission and Standards Committee the following month.

Candidates enrolled in an education program can, due to extenuating and documented circumstances, petition the Admission and Standards Committee to approve an exception to:

- a College of Education academic policy
- a department policy that has not been granted at the department level

Please Note: Do not use this Academic Petition form to:

- Request course offerings, or to address a grievance/ complaint/ disagreement about a decision that has been made regarding: a course grade; Admission to the College of Education, student teaching, or other clinical experiences.
- dismissal from an education program, course, or clinical experience;
- Evaluation or grade in a clinical experience; or licensure.
- Information about The College of Education Student Grievance Procedure is available in the Undergraduate and Graduate Catalogs, and in the office of the Dean of Education, ED 320, and at <https://www.csu.edu/collegeofeducation/policies.htm> (under the 'Grievance' tab).

It is the candidate's responsibility to attach pertinent documents to support the petition request. Statements and claims asserted in the petition will not be considered by the Committee if supporting documentation is not attached. Documents become part of the candidate's academic record and will not be returned.

The Committee will make a recommendation to the Dean of Education, who makes the final decision. Decision letters will be emailed to the candidate using the contact information provided on this form.

Date _____

Name _____ CSUID: _____

Email: _____

PLEASE STATE:

(A) THE COLLEGE OF EDUCATION OR DEPARTMENT POLICY YOU ARE REQUESTING AN EXCEPTION TO. FOR MORE INFORMATION, REFER TO <https://www.csu.edu/collegeofeducation/policies.htm> (located under the 'general' tab).

(B) LIST THE COURSES (NUMBER AND TITLE) BEING PETITIONED AND THE EXTENUATION REASON(S) YOU DID NOT COMPLY WITH THE POLICY (ATTACH SUPPORTING DOCUMENTATION):

(C) THE REASON(S) YOU SHOULD BE GRANTED THIS EXCEPTION:

CANDIDATE'S NAME/SIGNATURE/DATE: _____

ADVISOR'S NAME/SIGNATURE/DATE: _____
(SIGNATURE CONFIRMS REVIEW OF PETITION, NOT PETITION APPROVAL).

CHAIR'S NAME/SIGNATURE/DATE: _____
(SIGNATURE CONFIRMS REVIEW OF PETITION, NOT PETITION APPROVAL).

PLEASE INDICATE YOUR REASON FOR APPROVING/NOT APPROVING THIS PETITION.

Department supports petition _____

Department does not support petition _____