



Academic Petition

Student's Name: _____

Date: _____

Personal Reference # (PRN): _____

Email Address: _____

Major: _____

Graduation Date: _____

Semester/Term: _____

- 1. The student must submit a separate written statement explaining the nature of the petition.
- 2. A letter of support from an appropriate person (faculty) must accompany this form.

Signatures: By signing below I acknowledge that the department chair, program director, or dean's signatures address only considerations related to academic policy. Financial policies regarding refunds are governed by approved and published policies without exception.

Student's Signature: _____

Date: _____

Program Director/
Dept. Chair's Signature:

(Matriculating students only)

Approved

Denied

Date: _____

Academic Dean's Signature: _____

Approved

Denied

Date: _____

This completed form becomes part of the official student academic record in Registrar's Office.