

SCSU Records & Registration

ACADEMIC PETITION

This form is to be used by students to request variations from stated academic policies and procedures. Complete this form, include supporting documentation if necessary, and return this petition to the Office of Records and Registration, AS 118.

Name _____ Student ID# _____ Date _____

Current mailing address _____
Street City State Zip

Major _____ Email _____ Phone _____

Semester _____ Year _____ Course(s) _____

Purpose of Petition:

What is rationale to justify this petition? (Use additional sheet if needed. Attach applicable documentation.)

Recommendation of Instructor: Support Oppose Recommendation to be filed separately

Instructor Name _____
Signature Printed Name

FINAL ACTION: This petition is: GRANTED DENIED

COMMENTS:

Signed _____

Date _____

Notification after decision: 1. Student 2. Instructor