

Academic Petition: Form A

Student Name: _____ **Date:** _____
Campus ID: _____ **Major:** _____
Classification: FR SO JR SR
Faculty Advisor Signature: _____ **Date:** _____

Petition Instructions

Petitions for **Course Overload** must include a typed letter that indicates:

- Why overload is necessary
- Cumulative GPA _____
- Number of credits above 17(max course load)
- Attach copy of student schedule

Petitions for **Directed and Independent Study Courses** must include:

- A letter indicating why it is required
- Syllabus or course outline
- Signature of faculty who is willing to facilitate the special course: _____

Academic Standing Committee Notes/Decision

- Approved _____ Decision Date: _____
- Denied _____
- Tabled – Needs Research _____
- Forwarded to: _____
- Returned to Student for: _____