Student Academic Petition



ID#	Name:		Class Vasar
ID#	Name:		Class Year:
Major/Minor (i			GPA:
PLEASE NOTE: This form will not be accepted unless fully completed.			
		<u>Directions</u>	
 Complete #1, 2, and 3 below. In every case you must receive a signature from your faculty advisor and any instructor who is involved. Make a copy of the complete petition for your records and return the original to the Registrar's Office. You will be notified via Wells e-mail with a decision regarding your petition. PLEASE NOTE: the signatures below reflect approval of the request by your faculty member/advisor, but the final decision rests with the Committee on Academic Standing, Advising and Admissions. You should not consider this petition to be approved until you are formally notified of a decision. 			
1. I request pe	rmission to (check all tha	t apply):	
Course overload			
Internship approval			
Add/Drop a course after the deadline			
Withdraw passed the deadline			
Other			
2. Indicate complete reasons for this petition. If a failure to meet the deadline is involved, please provide a detailed explanation for missing the deadline. (use other side of form or attach another sheet if needed):			
IMPORTANT: For a drop or withdrawal, completing fewer than 12 credit hours during any semester may jeopardize financial aid for the following semester. Consult with the Financial Aid office with any questions. 3. Required Signatures:			
Student:			Date:
Advisor:			Date:
Advisor's N	ame:		
-Support	-Do Not Support	-Support With Reservations	s
Instructor ¹ :			Date:
Instructor's	Name:		
-Support -Do Not Support -Support With Reservations Instructors: If petition is for late withdrawal from a course please note the student's current grade:			
Comments	:		
- Appro	oved - Not Approv	ed Signature:	Date:
Petition	1#	ASAA Chair or Registrar	

¹ Instructor signature only required when the petition refers to a specific course.