

TO: Committee on Academic and Professional Standards

RE: Petition to **CHANGE A COURSE FROM A REGULAR TO S/U GRADE AFTER THE DEADLINE (OR CONVERSELY)**

Name: _____ ID#: _____

Local Address: _____ Phone #: _____

College (circle one): A&S CBA ENGR NURS Class: _____ Major(s): _____

Expected month/year of graduation: _____ Degree expected: _____

I REQUEST PERMISSION TO CHANGE MY OFFICIAL REGISTRATION AS INDICATED BELOW:

Department: _____ Course Number/Section: _____ Title: _____ Credits: _____

Check one: _____ From Regular Grade to S/U
 _____ From S/U to Regular Grade

REASON FOR REQUEST: (Use other side, or attach additional pages, if necessary): *Note that the catalog states that changes in registration after deadlines are allowed only in exceptional cases involving extreme contributory circumstances, and that unsatisfactory academic performance is not sufficient reason for petition. Please state clearly and completely in your petition the nature of these circumstances.*

Student's Signature: _____ Date: _____

TAKE THE FOLLOWING ROUTE FOR CONSULTATION AND RECOMMENDATION:

To the faculty: Students are required to obtain your counsel on this petition. Your signature below indicates only that you have been consulted on this proposed action, not that you approve or disapprove. You may include comments if desired, or you may send your comments directly to the dean.

Adviser's Signature: _____ Date: _____
Comments: _____

Instructor's Signature: _____ Date: _____
Comments: _____

Dean of Student's College Signature: _____ Date: _____ APPROVED _____
(If approved, the Dean will forward a copy to the Office of the Registrar and a copy to the Department Chair)

REFERRED TO CAPS _____ RECOMMEND FOR _____ RECOMMEND AGAINST _____

COMMITTEE ACTION: APPROVED _____ DENIED _____

Chairperson's Signature: _____ Date: _____

Copies will be sent to the Registrar, the Dean of the student's college, and to the Department Chair. The student will be notified by the Registrar.