

Andrews University

Undergraduate Petition Form

Name _____ ID _____ Cell Phone (_____) _____ - _____

Academic Year FR SO JR SR Grad Date _____ Email _____@andrews.edu

_____ BA/BS _____ Professional _____ Transfer Student (24+ credits taken previously)

Major: _____ Advisor: _____

Minor: _____ Advisor: _____

College/School: _____

Course Taken: Prefix _____ Number _____ Title _____ Credits _____ Grade _____

Institution where course was taken _____
Include course description if course was not taken at AU

_____ Waive _____ Substitute

Course Required: Prefix _____ Number _____ Title _____ Credits _____

OR Category Requirement (GE Courses Only)

_____ Religion _____ Mathematics
_____ Composition/Communication _____ Computer Literacy
_____ History _____ Service Learning
_____ Fine Arts/Humanities _____ Social Sciences: _____ Foundation _____ Interdisciplinary
_____ Science: _____ Life _____ Physical _____ Fitness Education

Explanation

Student's Signature _____ Date _____

Recommendations

Yes _____ No _____ *Advisor _____ Date _____

Yes _____ No _____ **Dept. Chair _____ Date _____

* Advisor signature needed for GE (General Education Requirement)

** Advisor AND Department Chair signatures needed for major or minor request.

Approval

Yes _____ No _____ Academic Dean _____ Date _____

Yes _____ No _____ GE/Honors Director _____ Date _____

Office Use Only

Date Received: _____

Accepted: Yes No

If No:

_____ Transcript Missing

_____ Information Missing

_____ Wrong Course/Acronym

_____ Dean's Signature Missing

_____ Other: _____

Sent to Articulation Office: _____

Date Entered: _____ Initials: _____

Comments: _____