

Andrews University

ACADEMIC PETITION FORM

(All information must be completed and legible for this to be processed)

Name: _____ ID: _____ Advisor: _____ Bulletin Year: _____

Address: _____ Phone: _____ Degree: _____

E-mail: _____ Major: _____ Minor: _____ Anticipated Grad Date: _____

Are you?	Yes	No	School	
Undergraduate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> College of Arts & Sciences	<input type="checkbox"/> School of Education
Transfer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> College of Technology	<input type="checkbox"/> School of Architecture
Acad. Probation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> School of Business Administration	<input type="checkbox"/> Theological Seminary
Honors	<input type="checkbox"/>	<input type="checkbox"/>		

This petition request is for ☐ Major ☐ Minor ☐ General Education

Reason (1–10) _____ If necessary, explain further: (see below)

- | | |
|--|---|
| 1. Similar course content | 6. Course not offered—Senior year |
| 2. Same course—name or number change | 7. Course taken on PTC Status = degree credit |
| 3. Transfer credit—equivalent course | 8. Recommendation by advisor/chair—fits student needs |
| 4. Permission to take course | 9. Required course substitution |
| 5. Course no longer offered—replacement course | 10. Waiver |

Request: (The Required Course)

Acronym	Number	Course Name	Credits
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Replace by: (Course Taken)

Acronym	Number	Course Name	Credits	Grade Received
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Student Signature _____

Date _____

Reason (11–12) _____ If necessary, explain further (see below):

11. Petition to attend another college—attach a course description of that course.
 12. Other—explain

Explain:

Student Signature _____

Date _____

Recommendations:

☐ Yes ☐ No _____
 Advisor Date

☐ Yes ☐ No _____
 Department Chair (Major/Minor request only) Date

APPROVED: ☐ Yes ☐ No _____
 Dean/Graduate Dean/General Ed Director Date