WHEATON COLLEGE  ACADEMIC PETITION

This form is to be used by students to request variations from stated academic policies and procedures. Obtain a recommendation from your advisor and return this petition to the Office of the Registrar.

Name ___________________________________________  Student # _________  Date ____________

Classification (circle one):  Fr  So  Jr  Sr  Grad  Phd/PsyD  Other_____________________

Major _________________________________  CPO _________  Phone _______________________

Purpose of Petition:

What is the rationale to justify this petition? (Use additional sheet if needed)

____________________________________________________
Recommendation of Student’s advisor: (circle)

Grant  Deny  Recommendation to be filed separately

Advisor’s Signature (required) ______________________________

Return petition to Registrar’s Office for appropriate action.

Decision on this petition to be made by: (person, department, committee)

____________________________________________________

FINAL ACTION: This petition is ____________  COMMENTS: ____________

GRANTED □  DENIED □

Signed ____________________________

Title ______________________________

Date ______________________________

Distribution:  Original - Registrar’s Office  Final Decision - Email to Student and Advisor

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