

Barcode label  
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# UNDERGRADUATE PETITION FORM



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Semester \_\_\_\_\_

P \_\_\_\_\_

### PLEASE PRINT CLEARLY

***A copy of the final decision will be sent to the student's UA email account***  
Please submit completed form with required signatures to the Office of the Registrar

\_\_\_\_\_  
Name

\_\_\_\_\_  
UA Student ID#

\_\_\_\_\_  
Mailing Address

**PETITION TYPE:**  Major or minor requirement  
 Degree or other requirements

\_\_\_\_\_  
City State Zip

*-Please provide separate forms for each petition.  
-Petitions seeking to waive or substitute degree requirements or other matters on the basis of a disability, the UAF Coordinator of Disability Services will be consulted.*

\_\_\_\_\_  
Phone

\_\_\_\_\_  
UA Email Address

### DEGREE INFORMATION

\_\_\_\_\_  
Catalog Year Degree Type Major (and concentration, if applicable): Campus

Expected year of graduation:  Fall \_\_\_\_  Spring \_\_\_\_  Summer \_\_\_\_

**I hereby petition to:**

### Justification

### SIGNATURES REQUIRED FOR THE FOLLOWING PETITIONS:

**Major or Minor Requirements-** Advisor and Department/Program Chair of student's major or minor area\*

**Degree or Other Requirements-** Advisor and Dean/Director of College/School of the student's major\*

\*Then submit form to the Office of the Registrar

\_\_\_\_\_  
Date Advisor Signature  Approved  Denied

\_\_\_\_\_  
Advisor (Printed Name)

\_\_\_\_\_  
Date Department/Program Chair Signature  Approved  Denied

\_\_\_\_\_  
Department/Program Chair (Printed Name)

\_\_\_\_\_  
Date Dean Signature  Approved  Denied

\_\_\_\_\_  
Dean (Printed Name)

The Office of the Registrar will send the completed form to the Provost for approval if necessary.

\_\_\_\_\_  
Date Provost Signature  Approved  Denied

\_\_\_\_\_  
Provost (Printed Name)

Page \_\_\_\_ of \_\_\_\_