

## Charles E. Schmidt College of Science UNDERGRADUATE PETITION

**DO NOT USE** this form if you plan to withdraw from all classes in the current term due to a **Medical hardship**, **Military obligations or Death in the immediate family**. Please contact Dean of Student Affairs, located in Bldg. 8, Rm. 226.

Student's NameZ r	number
Major or CollegeE-	mail
	Decisions are sent to this email address
Address	
Local Telephone #	_
Read both sides of this petition carefully. Please submit along with a typewritten statement of your request describ option you check below and documentation such as minstructors etc. If your petition is for a late withdrawal from oprofessor complete the Late Withdrawal form (on the collegare not considered complete without the required documental to the considered complete without the required documental to the required documental transfer or the considered complete without the required documental transfer or the considered complete without the required documental transfer or the considered complete without the required documental transfer or the considered complete without the required documental transfer or the considered complete without the required documental transfer or the considered complete without the required documental transfer or the considered complete without the required documental transfer or the considered complete without the required documental transfer or the considered complete without the required documental transfer or the considered complete without the required documental transfer or the considered complete without the required documental transfer or the considered complete without the required documental transfer or the considered complete without the required documental transfer or the considered complete without the required documental transfer or the considered complete without the required complete without the required documental transfer or the considered complete without the required complete without the required complete without the considered complete without the cons	ing the extenuating circumstances of the dical records, letters from professor ne or more classes, you must have each e Student Services web site). <b>Petitio</b> r
I am requesting:	
☐ Last 30 Hours Upper Division Course Work	☐ Change in Sections
☐ Waiver of 45 Upper Division Credit Hour Graduation Requirement	☐ Change of Grade Type
☐ Approval of Non-Degree Credit Hours	☐ Waive 9 Hour Summer Rule
☐ Late Add a class	☐ Late Withdrawal
List Term, Course, Prefix, Sect. & Credit	List Term, Course, Prefix, Sect. & Credit
☐ Total Withdrawal for a Specific Term	
<ul> <li>Reinstatement into FAU* Term requested</li></ul>	oplication are July 1 (for Fall), November 15 (Spring) and
(College or University)	(Dates of Attendance)
(College use only) ☐ Other:	
Certification: I hereby certify that these facts are true and accurate	to the best of my knowledge.
Student's Signature	Date

## GUIDELINES

Fully explain your reason for petitioning on a typewritten statement and indicate reason below: Documentation needed: (must be on letterhead) Reason(s) for Request: Never attended Have the instructor complete the Late withdrawal request form, stating that the student never attended. You will need to provide medical records that provide your dates of Personal illness appointments, diagnosis, and prescribed care. An excuse from a class does not constitute medical documentation. Description of problem, with verification from Student Health Services, Personal and/or family problems personal physician, clergy, police, etc. Employment verification by supervisor (including Schedule, date of Work circumstances schedule change, and hours per week) Other: Statement of problem & appropriate verification. Make and keep copies of all documentation for your records prior to submitting your petition. We will not make copies or return documentation to you. Approval to drop a course(s) DOES NOT mean an approval for refund of fees. Please contact the Controllers Office located in Building 80, Room 227 for a Fee Petition. Students on Financial Aid are responsible for notifying the Office of Financial Aid regarding any changes to their schedule. PLEASE NOTE THAT THE FOLLOWING REASONS ARE NOT ACCEPTABLE TO WITHDRAW LATE FROM A CLASS: 1) YOU ARE FAILING OR NOT DOING WELL IN THE CLASS; 2) YOU HAVE CHANGED YOUR MAJOR AND NO LONGER NEED THE CLASS; 3) YOU NEED TO PROTECT YOUR GPA. For College Office Use Only UNDERGRADUATE PETITION NOTIFICATION ☐ Approved ☐ Approved for Medical or Personal Hardship **Petition Decision:** □ Denied □ Deferred Comments: Signature of College Representative Date Dr. Evonne Rezler, Associate Dean

If you have any guestions concerning this action, please contact your College Representative.

Final Action:

College representative will submit original documents to the Office of the Registrar