



Office of the Registrar  
 University of California, San Diego  
 Student Services Center, Suite 261  
 9500 Gilman Drive # 0022  
 La Jolla, CA 92093-0022

# UNDERGRADUATE STUDENT PETITION

**INSTRUCTIONS:** Check appropriate box.

- DEPARTMENTAL EXCEPTIONS:** Select this option if you are requesting any departmental exceptions including course substitutions. If a course does not appear on an approved list published in the general catalog, department publications or approximation chart, SUBMIT this petition to your MAJOR DEPARTMENT. **Remember to include a course number and indicate whether the course is lower or upper division.**
- COLLEGE EXCEPTIONS:** Select this option if you are requesting any college exceptions including General Education course substitutions. If a course does not appear on an approved list published in the general catalog, college publications or articulation agreement, SUBMIT this petition to your COLLEGE ADVISING OFFICE.
- SUMMER SESSION:** Select this option if you are requesting any exceptions to the general rules governing summer session.
- UNIVERSITY EXCEPTIONS:** Select this option if you are petitioning for reasons other than the above, but which are exceptions to University Policy. Please check with your College Advising Office regarding appropriate signatures.

Name: \_\_\_\_\_  
                     Last                                    First                                    Middle

P.I.D.#: \_\_\_\_\_ Class Level: \_\_\_\_\_

Current Address: \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

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

Local Telephone: (\_\_\_\_) \_\_\_\_\_

Major: \_\_\_\_\_

College: \_\_\_\_\_

**IF APPROVED, YOUR PETITION WILL BE PLACED IN YOUR FILE.  
 IF DISAPPROVED OR APPROVED WITH CONDITIONS, YOU WILL BE NOTIFIED.**

**If UCSD course:** Subject: \_\_\_\_\_ Course #: \_\_\_\_\_ Grade Option: \_\_\_\_\_ Units: \_\_\_\_\_ Section ID: \_\_\_\_\_ Term: \_\_\_\_\_  
**If UCSD course:** Subject: \_\_\_\_\_ Course #: \_\_\_\_\_ Grade Option: \_\_\_\_\_ Units: \_\_\_\_\_ Section ID: \_\_\_\_\_ Term: \_\_\_\_\_  
**REQUEST:** (If you are petitioning a non-UCSD course, attach a copy of the catalog course description.) \_\_\_\_\_

**REASON FOR REQUEST:**

STUDENT SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

**For Official Use Only**

**APPROVAL**

\_\_\_\_\_  
 Instructor/Faculty Advisor Date

\_\_\_\_\_  
 Department Chair Date

\_\_\_\_\_  
 College or Summer Session Director (Summer Only) Date

Pending receipt of official transcripts verifying appropriate transfer credits and grade.

**DISAPPROVAL**

\_\_\_\_\_  
 Instructor/Faculty Advisor Date

\_\_\_\_\_  
 Department Chair Date

\_\_\_\_\_  
 College or Summer Session Director (Summer Only) Date

**COMMENTS:** \_\_\_\_\_

Grade Report     ISIS    Registrar: \_\_\_\_\_ Date: \_\_\_\_\_