OFFICE OF THE REGISTRAR
REGISTRATION PETITION

Student Identification Number: ________________________

Name: ______________________________________________________________________

Last Name,  First Name  Middle Initial

Instructions:
1. List departments, catalog number, section (if applicable), title, and credits for each course.
2. Secure appropriate signatures.
3. Complete registration procedure and make a payment in accordance with procedure published in the Schedule of the Course booklet.

I. APPROVED PETITION REQUIRED COURSES
Approval is granted to enroll in the following course(s) which require(s) special approval.

_________________________________
Authorized Signature

II. CREDIT OVERLOAD
Approval is granted to exceed the maximum credits permitted for the student classification.

______________________________
Credit load approved  Assistant to the Dean

III. TIME CONFLICT PETITION
Approval is granted to enroll in the following two courses which are in conflict.

_________________________________  ___________________________________
Course #1  Course #2

_________________________________  ___________________________________
Signature of Chairperson #1  Signature of Chairperson #2

Revised December 18, 2007