ACADEMIC POLICY PETITION

DIRECTIONS
Use this form to petition for an exception or other accommodation to UMC or University academic policies. DO NOT USE THIS FORM TO REQUEST A RETROACTIVE COURSE CANCELLATION OR TUITION REFUND (see http://www3.crk.umn.edu/onestop/registration/Forms/TuitionRefundAppeal.pdf). Contact your academic adviser to determine what additional documentation may be required and whether your request is due by a specific date.

The Academic Standards & Policy Committee and other University offices will review your request, as necessary. Their decision on the action to be taken will be sent to your official University email account.

PART 1: Student background

University ID
Name (last, first, middle)

Birth date (mm/dd/yyyy) University e-mail address Personal e-mail address Phone (include area code)
@umn.edu

Current mailing address (street, apartment number or P. O. box number, city, state, ZIP Code, country)

Expected term/year of graduation (add last two digits of the year)
□ fall semester 20 __ __ □ spring semester 20 __ __ □ May session 20 __ __ □ summer session 20 __ __

PART 2: Petition description

Briefly state the exception or approval you are requesting.

Provide an explanation or reason to grant your request. Attach a separate sheet if necessary.

PART 2 continues on page 2

The University of Minnesota is committed to the policy that all persons shall have equal access to its programs, facilities and employment without regard to race, color, creed, religion, national origin, sex, age, marital status, disability, public assistance status, veteran status or sexual orientation. This form is available in alternative formats upon request. Please call Disability Services at 218-281-8587.
REQUEST TO ADD CLASSES—Request to register for classes by completing the information below. You may check class availability online at http://www3.crk.umn.edu/onestop/registration/class_schedule.htm

<table>
<thead>
<tr>
<th>Term/year</th>
<th>Course subject, number, section (e.g., Comp 1011-003)</th>
<th>5-digit class number</th>
<th>Credits</th>
<th>Grade basis (A-F or S/N)</th>
<th>Instructor Signature</th>
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REQUEST TO CANCEL CLASSES—Be aware that you may lose financial aid eligibility by canceling class(es). For more information on the consequence of taking fewer credits, go to www3.crk.umn.edu/onestop/financial_Aid/gen_info/tuition.htm.

☐ Check here to cancel all classes.
☐ Check here to use the one-time undergraduate discretionary course cancellation or withdrawal (i.e., “one-time drop”). After you give the course information below, add your signature to certify that you have not taken the final examination or completed the final project for the course. Your record will indicate a ‘W’ for withdrawal from this course.
☐ Check here to cancel individual classes. Give the course information requested below for each class.

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<th>5-digit class number</th>
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STUDENT CERTIFICATION
By signing this form, I am certifying that the information I provided is true. I understand that misrepresentation of facts or documentation may be sufficient cause, in and of itself, for automatic denial of this appeal and may be in violation of the Student Conduct Code and subject to disciplinary action up to and including dismissal.

Student's signature (required)  Date

PART 3: Adviser’s recommendation
Add your comments/recommendation to the request made in Part 2 of this form (not required for the one-time discretionary course cancellation or withdrawal from all courses).

Adviser’s Comments/recommendations

Adviser’s signature  Date

PART 4: Action taken
The following action has been determined after University of Minnesota review.

Petition is ☐ approved ☐ denied  Petition expiration date (process by due date, if applicable)

Comments

Signature of authorized AS&P committee member/staff  Date

SUBMIT TO: Office of the Registrar, 9 Hill Hall, 2900 University Avenue, Crookston, MN 56716

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