PETITION TO COMMITTEE ON ACADEMIC PROGRESS
OFFICE OF THE REGISTRAR • LAFAYETTE COLLEGE

Students in the part-time studies program should return form to the Office of Part-time Studies.
All other should return form to the Office of the Registrar. Please print clearly.

Name: ____________________________ Student ID #: __________________
Campus E-Mail Address ____________________________ Class: ________ Term GPA: ________
Campus Box #: ____________________________ Degree: ________ Cum GPA: ________
Daytime Phone #: ____________________________ Major: ________
I hereby petition the Committee to permit me to: Student Signature: __________________ Date: ________

□ Change Curriculum (Degree) from ________ to ________ Please list both if requesting two degrees.
□ Change Major from ________ to ________

□ Add Minor Program in ________

□ Schedule Overload / Light Load of _____ Courses
□ Course Substitution ________ for ________
□ Pass / Fail Grading in ________
□ Audit Grading in ________
□ Waiver of Curricular Course Requirement / Waiver of Academic Regulations

Explain: __________________________________________
□ Late Course Registration in ________
□ Late Course Withdrawal in ________

A course add form or withdrawal form must accompany this petition. Courses added after the 2nd week or course withdrawals without a failing grade after the 11th week are considered only under EXCEPTIONAL circumstances.

□ Other: __________________________________________

Reasons: __________________________________________

__________________________________________

All requests must include a reason for the request. Please use reverse side of first page if you need more space.

STUDENTS - DO NOT WRITE BELOW THIS LINE

Advisor Recommendation: Comments: __________________________
□ Approval
□ Denial
□ No Recommendation Signature: __________________________ Date: ________

Department Recommendation: Comments: __________________________
□ Approval
□ Denial
□ No Recommendation Signature: __________________________ Date: ________

Instructor Recommendation: Comments: __________________________
□ Approval
□ Denial
□ No Recommendation Signature: __________________________ Date: ________

Committee Action: □ Approval □ Denial

Comments: __________________________________________

______________________________________________________________________________________

Registrar/Academic Progress Committee Date