**Request to the Senate Committee on Academic Regulations and Petitions**

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| **Name:** |  | |
| **Address:** |  | |
| **Email:** |  | |
| **Phone No.** |  | |
| **Student No.** |  | |
| **Status:** | **Full Time** | **Part Time** |

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| --- | --- | --- | --- |
| **Request (box will expand as needed)** | |  | |
|  | | | |
| **Signature:** |  | **Date:** |  |

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| **Recommendation (box will expand as needed)** | |  | |
|  | | | |
| **Recommended by:** |  | **Date:** |  |

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| **For office use only** | |  | |
|  | | | |
| **Registrar:** |  | **Date:** |  |