

## **ACADEMIC PETITION**

Requests for review of academic policies and requirements as stated in the University Catalog under Academic Regulations and Procedures or review of major program policies and requirements as stated in the University Catalog within the Undergraduate Program pages. **Not to be used for a course substitution, course relief, or grade appeal.** 

Complete and obtain all signatures then sub	mit to the Office	of the Registrar.	
Name			_
Address			_
City		State	Zip
Student Identification Number (L#)	<del>.</del>		
Student E-Mail Address			
Major / Degree			
Briefly state the details of your request and att	tach a letter expla	ining your petition and sup	pportive documentation.
	_		
SIGNATURES:			
Advisor			Da
Advisor Comments:			
Department Chair of Major			Da
Chair Comments:			Da
College Dean of Major Dean Comments:			Da
Petitions Committee Decision:	Approved	Disapproved	Date:

Learning Center 109 | Office: (864) 388-8503 | Fax: (864) 388-8028 | registrar@lander.edu