

Petition

Incomplete forms will be returned to the student

Name _____ ID Number _____ Date _____

Mount Mercy Email Address: _____

A. To request a transfer or substitution of a course:

1. Full title of course and course number: _____

Name of school: _____ Date course taken or will be taken: _____

A course description must be attached to any petition involving a transfer course, and a syllabus is recommended.

2. If you are seeking permission for a course, indicate how you want it to be counted:

___ Major or minor (specify by name): _____

___ Core curriculum (specify area): _____

___ General elective

B. Other request (state briefly): _____

C. Provide a detailed reason for your request. This section **MUST be completed in order for the petition to be considered.**

Reason for request (Use additional sheet if necessary):

Advisor Review: Advisor recommends approval by signing in this box. *Advisor signature is required.

Advisor Print Name

Advisor Signature*

Date

Comments:

Department Chair or Appropriate Program Director Review:

Recommend Approval: _____ Recommend Denial: _____

Signed: _____

Department Chair or Program Director* Date

Comments:

(*For discipline area of requested course)

Final Action of Academic Affairs:

Approved _____ **Denied** _____

Signed: _____

Provost's Office

Date

Comments/Rationale:

After completing form:

- Print the form and discuss it with your advisor. Petitions must be signed by your advisor to be accepted.
- Send to the Academic Affairs Office, 214 Warde Hall
- Processing takes approximately 2 weeks.
- Please note that petitions DO NOT function as registration forms. You must submit a registration form to the Registrar's Office if you have received special permission to register for a course.
- ***A PDF copy with the final decision will be sent to your Mount Mercy e-mail account.***