CALIFORNIA STATE POLYTECHNIC UNIVERSITY, POMONA Graduate Academic Petition

Name				Date		
(Last) Address_	(First)		(M.I.)	Bronco Num	ber	
(Number & Street)	(City	<i>'</i>)	(Zip)	_		
Major	or Option			Cal Poly Pomona email		
Purpose of Petition: (Check on Course Substitution(Stud Waive Residency (Please you are requesting a wair Change of Status Other (e.g. adding or del	dent must have a pro- e indicate remaining ver of residency.) eting a course,transf	degree requin	rements to be complete	ng a course substitution. d in your reason for requ ity.)	est. Indicate the term	
Reason for request :						
Please make the following changes on official Master's Contract: Delete: Dept./Course # Course Title Units Sem/Year			For Change of Status: (To be completed by the Graduate Coordinator) Effective Semester: Check one:			
•			The above conditionally classified student has satisfied the conditions stated at the time of admission and is recommended for unconditional standing The above conditionally classified student has not satisfied the conditions stated at the time of admission and is recommended for dismissal from this degree program			
Student's Signature						
Approved/Disapproved				_Advisor	Date	
Approved/Disapproved				_Graduate Coordinator	Date	
Approved/Disapproved				_Dept. Chair	Date	
Approved/Disapproved				_College Dean	Date	
Reviewed by Graduate Studies		Date				

Approved Petition must be forwarded to the Graduate Studies Office If petition is not approved, Return To Student

Distribution: It is suggested that each party make a copy of this form before forwarding. (Final approved copy will be available for viewing on PolyDoc)

Note: Department should give student his/her copy (The copy does not constitute final approval).