

CALIFORNIA STATE POLYTECHNIC UNIVERSITY, POMONA
Graduate Academic Petition

Name _____ Date _____
 (Last) (First) (M.I.)

Address _____ Bronco Number _____
 (Number & Street) (City) (Zip)

Major _____ Option _____ Cal Poly Pomona email _____

Purpose of Petition: (Check one) Home Phone Number _____

- ___ Course Substitution
- ___ Waive Residency (Please indicate remaining degree requirements to be completed in your reason for request)
- ___ Time Extension (Formal certification and validation of outdated coursework must be attached to this Petition beyond a one quarter extension)
- ___ Change of Status
- ___ Other (.e.g. adding or deleting a course)

I hereby petition to : _____

Reason for request : _____

Please make the following changes on official Master's Contract:

Delete:

Dept./Course #	Course Title	Units	Qtr/Year

Add:

Dept./Course #	Course Title	Units	Qtr/Year

For Change of Status: (To be completed by the Graduate Coordinator)
 Effective Quarter: _____

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