



University Advising Services

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UNDERGRADUATE ACADEMIC PETITION FORM
(UNDECIDED MAJORS AND NON-DEGREE SEEKING STUDENTS ONLY)

Student Name: (Please print clearly) Z-Number: (Z-number - obtain through MyFAU)

Address:

I am requesting: (Check one of the boxes below)

- Drop specific course(s): Add a course after the deadline
Reinstatement into FAU\*
Total Withdrawal from a specific term: (List course prefix/number/section/CRN/credits, i.e. ENC / 1101 / 008 / CRN#83354/ 3cr)
Other:

\*If you have attended another college or university since your last enrollment at FAU, please list and request an official transcript be sent directly from the Registrar to the Office of the Registrar at FAU.

(College or University)

(Dates of Attendance)

IMPORTANT: Attach a typewritten statement of your request describing the extenuating circumstances which led to the option checked above. Petitions submitted without documentation will not be processed. Documentation may include; letters from faculty/instructors, an academic advisor, your employer, court records, etc.

Academic Petition Withdrawal (for Medical Reasons) the following documentation must accompany requests for withdrawals citing medical reasons:

- Physician/Clinician's written statement to include; Diagnosis (DCM / ICD, prognosis and dates of treatment.
The statement/documentation must be on official letterhead (not a prescription notepad).
The statement/documentation must include the doctor's name, title, date and signature
The doctor's statement must explain how the medical condition prevented the successful completion of the course(s) and the reasons why.

Student Signature: Date:

Telephone Number: FAU E-mail address:

For UAS Office Use Only

Academic Petition NOTIFICATION:

Your petition was reviewed on:



ACTION TAKEN: Approved Denied Deferred Date petition received

Comments:

If you have any questions concerning this action, please contact the petitions representative.

Signature
UN/UNDC College Representative: Date: