Credit / No Credit Petition

For term __________________

Student:
A petition to change the grading option will be approved after the 4th week of class (8-week course) or after the 8th week (semester course), only in cases where no substantial graded assignment was returned prior to the deadline or if there are extenuating circumstances identified and documented by the student.

Student’s Name ___________________________ Student’s Signature ___________________________

Student’s Address ___________________________ UIN ___________________________

Phone ___________________________ Major/Curriculum ___________________________

Email ___________________________

Instructor: Mr. / Ms. ___________________________ has requested to ___ELECT___ or ___DELETE___ the Credit/No Credit option for ___________________________:

(Subject, Course Number, Call Number)

The request has been made after the 4th or 8th week deadline for such actions. The student has asked for a waiver of the deadline for the reason that the first major evaluation in the course was returned after the 4th or 8th week of class. In order to take the appropriate action on the student’s request, the LAS college office needs your confirmation of the date on which the first substantial graded assignment (hour exam, major paper, etc.) was returned. Thank you for your cooperation.

Date on which the assignment was returned ___________________________ Instructor’s Name ___________________________

Instructor’s Office Phone ___________________________ Instructor’s Signature ___________________________

Academic Advisor:
Is this course being used for a major or General Education requirement? ___YES ___NO

Advisor’s Name ___________________________

Advisor’s Signature ___________________________

Advisor’s Office Phone ___________________________

FOR COLLEGE USE ONLY

APPROVE _______________ On Pro: ____________

DENY _______________ COMMENTS: _______________

COMMENT: _______________ 

COMMENT: _______________ 

DEAN’S SIGNATURE ___________________________ DATE ___________________________