



BYU Petitions Office  
 B-150 ASB  
 (801) 422-6570 / Fax: (801) 422-0615  
 E-mail: petitions@byu.edu  
 Website: http://petitions.byu.edu

# Student Academic Record Petition

**Use Black or Blue Ink Only**

\_\_\_\_\_  
Date Out

\_\_\_\_\_  
Date In

\_\_\_\_\_  
Date Submitted

## STUDENT INFORMATION

Name (Last, First, Middle)		Student ID Number		Telephone Number	
Local Mailing Address			City	State	Zip Code
Class(es) and Section Number(s)				Semester/Term and Year	
				1st Block 2nd Block	

**SUPPORTING INFORMATION IS REQUIRED FROM INSTRUCTORS AND, WHEN APPLICABLE, FROM PHYSICIANS OR EMPLOYERS.**

<b>This is a request to:</b>	Add a Class	Incomplete	<b>Because of:</b>	Medical/Clinical	<b>Are you:</b>	a federal financial aid recipient?
	Withdraw a Class	Incomplete Extension		Employment/Internship		a BYU scholarship recipient?
	Section Change	Credit Hour Change		Personal/Family		a BYU student athlete?
	Discontinue	Other _____				an international student? in Freshman Academy?

### STUDENT'S STATEMENT

Please write/type a detailed statement explaining the reason you are requesting an exception to University policy.

If my petition is approved, please charge the \$\_\_\_\_\_ add/withdraw fee to my student account. I hereby permit the supporting individuals to provide the University with information pertaining to my request and understand that notification of the Committee's decision will only be sent by mail.

**Student Signature** \_\_\_\_\_

**Office Use Only:**

Approved \_\_\_\_\_ Denied \_\_\_\_\_ Pending \_\_\_\_\_ Appointment \_\_\_\_\_  
 Reviewed \_\_\_\_\_ Charged \_\_\_\_\_ Processed \_\_\_\_\_ Letter Sent \_\_\_\_\_  
 Comments \_\_\_\_\_  
 \_\_\_\_\_

Student's Name \_\_\_\_\_  
 Middle  
 First  
 Last

## Instructor's Verification Form

Student Name \_\_\_\_\_ Student ID # \_\_\_\_\_

Class \_\_\_\_\_ Section \_\_\_\_\_ Registration # \_\_\_\_\_

### Adding

Date of first attendance \_\_\_\_\_ Date of last attendance \_\_\_\_\_ Date of last assignment turned in \_\_\_\_\_

Has attendance been regular?  Yes  No    Number of credit hours \_\_\_\_\_ If for a past semester, what grade did the student earn? \_\_\_\_\_

Adding this student to my class will not create an unfair burden on me or the class, and the student will have reasonable opportunity to complete the work for the class prior to the end of the enrollment period. Initials \_\_\_\_\_

### Withdrawing

Date of first attendance \_\_\_\_\_ Date of last attendance \_\_\_\_\_ Date of last assignment turned in \_\_\_\_\_

Has attendance been regular?  Yes  No

Was the student passing the class (D- or above) as of the last date of attendance or assignment turned in?

Yes (student will be withdrawn passing, "W")     No (student will be withdrawn failing, "WE")

### Incomplete Extension

Are you supportive?  Yes  No    Old completion deadline \_\_\_\_\_ New deadline \_\_\_\_\_

### Credit Hour Change

Are you supportive?  Yes  No    Credit hours currently registered for \_\_\_\_\_ Desired credit hours \_\_\_\_\_

Comments \_\_\_\_\_  
\_\_\_\_\_

Instructor's Signature \_\_\_\_\_

Instructor's Name (Please Print) \_\_\_\_\_ BYU Address \_\_\_\_\_ BYU Extension \_\_\_\_\_

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Student Name \_\_\_\_\_ Student ID # \_\_\_\_\_

Class \_\_\_\_\_ Section \_\_\_\_\_ Registration # \_\_\_\_\_

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Comments \_\_\_\_\_  
\_\_\_\_\_

Instructor's Signature \_\_\_\_\_

Instructor's Name (Please Print) \_\_\_\_\_ BYU Address \_\_\_\_\_ BYU Extension \_\_\_\_\_