

EXCEPTIONS ARE RARE AND
MADE ONLY FOR
DOCUMENTED, COMPELLING,
NON-ACADEMIC REASONS

**University of New Hampshire
UNDERGRADUATE ONLY
PETITION FOR VARIANCE IN ACADEMIC POLICY**

Date _____

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STUDENT I.D. NUMBER

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LAST NAME

FIRST NAME

MI

EMAIL

College/School (*circle one*) LSA LA EPS WSBE HHS TSAS DCE UNHM GSC

Major/Curriculum/Dept. _____

Class FR SO JR SR OTHER _____

I request _____

Reasons for this request _____

Your Local Address

Telephone

Course _____

Semester _____

If applicable

Signature

USE REVERSE SIDE IF NECESSARY

DO NOT WRITE BELOW THIS LINE

Instructor's comments

Instructor Signature

Date

Adviser's comments

Adviser's Signature

Date

Action

<input type="checkbox"/>	<input type="checkbox"/>
Approve	Deny

Dean (or Administrative Officer) signature

Date _____