Request for Exception to Independent Study Regulations

Name _____________________________________  U-mail ________________________________________   Perm______________

Last                           First                               Middle

Declared Major(s) ______________________________  Expected Date of Graduation _________________  Phone_________________

Check the regulation to which you are seeking an exception:

☐ < 90 units       ☐ 5 units maximum per term       ☐ 15 units maximum per academic year

No exception can be made to the limit of 30 total units of independent study.

List 98/99/198/199/199RA course(s) requested. Please include enrollment code, instructor number, units and grading option, where applicable. (If summer session indicate session.)

<table>
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<tr>
<th>DEPARTMENT</th>
<th>COURSE #</th>
<th>ENR #</th>
<th>INSTRUCTOR’S NAME</th>
<th>INSTR #</th>
<th>UNIT VALUE</th>
<th>GRADING OPTION</th>
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Term requested __________________________    Total # of Independent Study units requested for this quarter: ___________

Quarter         Year

Justification for exception:

____________________________________________________________________________________

Student’s Signature   Date

☐ Approved

☐ Denied

Dean of Undergraduate Studies        Date

⇒ With this petition you must provide: 1) An Instructor’s Statement of support; 2) a self-addressed, stamped envelope; 3) your proposal for each listed course. Incomplete petitions will be returned without action.

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Instructor’s Statement of Support: To Instructor(s): Please indicate 1) why you support the requested exception, 2) your grading criteria for the course, 3) your awareness of the student’s overall and major grade-point averages. Also, please sign and date your statement. You may refer to the reverse side or a separate Request for Exception to Independent Study Regulations for the total number of independent study units proposed.

(1)

Instructor’s signature   Date

(2)

Instructor’s signature   Date

(3)

Instructor’s signature   Date

DEPARTMENT CHAIR’S ENDORSEMENT:

☐ 1) I have read the preceding statements and I endorse the proposed exception.

Chair’s Signature   Date

☐ 2) I have read the preceding statements and I endorse the proposed exception.

Chair’s Signature   Date