



Request for Exception to Independent Study Regulations

➔ With this petition you must provide: 1) An Instructor's Statement of support; 2) your proposal for each listed course. Incomplete petitions will be returned without action.

Name _____ Perm# _____
Last First MI

U-mail Address _____ Phone () _____

Declared Major(s) _____ Expected Date of Graduation _____

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.

DEPARTMENT	COURSE #	ENR #	INSTRUCTOR'S NAME	INSTR #	UNIT VALUE	GRADING OPTION

Term requested _____ Total # of Independent Study units requested for this quarter: _____
(If summer session, indicate session)

Justification for exception:

Student's Signature

Date

Approved

Denied

Dean of Undergraduate Education

Date



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