

PETITION FORM – OFFICE OF REGISTRATION AND RECORDS

This form must be completed to request variation from the academic policies or requirements of Spring Arbor University. When the student has completed Section 1 and the advisor, section 2, the student returns the form to the Office of Registration and Records; who will route it as appropriate.

SECTION 1: To be completed by student

Student Name	SAU ID#
Classification: Freshman Sophomore Location: Undergrad Campus Off-car	☐ Junior ☐ Senior ☐ Post BA npus Teacher Edu. ☐ SAU Global or Online
If SAU Global, major, site and group #	_
Purpose of petition:	
Reason for this special action: (If more space is need	eded, continue on additional sheet)
Student Signature SECTION 2: To be completed by Advisor o	Date r Department Chair
Advisor position: Recommend Do	Not Recommend
Advisor Rationale:	
Advisor or Dept. Chair Name (please print)	Advisor or Dept. Chair Signature
SECTION 3: To be completed by Registrar This petition is: GRANTED DENIED	Comments:
Signed:	Date: