

ARCHITECTURE CURRICULUM PETITION

Student Name: _____ SID #: _____

Email Address: _____ Telephone: _____

Major: _____ Minor: _____

Date: _____ Expected Date of Graduation: _____

Requesting course to fulfill a Major Requirement (***Please Include the Course Syllabus***)

Requirement: _____ Course: _____

To substitute for Course (Title/Number): _____

(A listed course that is comparable)

Other (please specify) _____

REASON: (please explain your rationale for this request)

IMPORTANT

Submission of this petition does not guarantee approval. Petition must be approved by the faculty. Approval will be based on various factors, including senior residence requirement, number of units already earned at other institution, type of credit requested (i.e., grade or P/NP), etc.

Student Signature: _____ Date: _____

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(FOR OFFICE USE ONLY)

Faculty Signature: _____ Date: _____

Approved Denied

Date: _____

Comments:

Student notified of decision by adviser Date: _____

NOTE TO ADVISER: Please route approved curriculum decisions to evaluator and fill out DARs correction form as necessary.