

UNIVERSITY OF SOUTH CAROLINA-AIKEN

ACADEMIC PETITION

To be completed and returned to the Office of the Registrar once your advisor and dean/department chair have signed. Please take no action until you have received official notice of the decision made on this request.

SUBJECT OF PETITION: _____ DATE OF PETITION: _____

- Waive the Institutional Credits for a Degree Rule (last 25% of Credit Hours).
EXPLAIN: _____
(For the waiver of this rule, the advisor must review student's record in advance of completing this form. This rule now applies to coursework within the USC system as well as outside the system.)
- Course Substitution. EXPLAIN: _____
- Other. EXPLAIN: _____
The evaluation of transfer work rests solely with the academic evaluators in each discipline and is not subject to petition.

NAME: _____ VIP ID _____

LOCAL ADDRESS: _____

LOCAL PHONE: _____

MAJOR: _____ STUDENT'S SIGNATURE: _____

NOTE: If your request involves taking coursework elsewhere, the completed "Request for Special Enrollment" must be attached. If you need additional space to explain the reason(s) for your petition, please attach a separate piece of paper with that information

ADVISOR: _____ DATE: _____ <input type="checkbox"/> APPROVAL <input type="checkbox"/> DISAPPROVAL
REASON: _____

SCHOOL DEAN/ DEPART. CHAIR: _____ DATE: _____ <input type="checkbox"/> APPROVAL <input type="checkbox"/> DISAPPROVAL
REASON: _____

SS&P ACTION (1ST READING): _____ DATE: _____ <input type="checkbox"/> APPROVAL <input type="checkbox"/> DISAPPROVAL
REASON: _____
SS&P ACTION (APPEAL): _____ DATE: _____ <input type="checkbox"/> APPROVAL <input type="checkbox"/> DISAPPROVAL
REASON: _____

ADMINISTRATIVE ACTION OR FURTHER APPEAL TO EXECUTIVE VICE CHANCELLOR FOR ACADEMIC AFFAIRS:
SIGNATURE: _____ DATE: _____ <input type="checkbox"/> APPROVAL <input type="checkbox"/> DISAPPROVAL
REASON: _____