



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.)

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

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.



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