

Petition to the Academic Requirements Committee

Use this Petition to Add, Drop Without a Recorded W, or Withdraw with a Recorded W

Approved petitions are subject to a fee of \$25-\$50. If the petition is for initial registration for the term, a \$100 late registration fee may apply after the 4th week of the term.

Return to:

Office of the Registrar
registrar@uoregon.edu

Name: Lennon Connor M UO ID Number: 951654118
Last First MI

Address: 2905 Ferry St Eugene OR 97405
Street City State Zip

E-mail: Clennon@uoregon.edu Phone: (206) 930-7728

PETITION GUIDELINES

**** READ CAREFULLY ****

You are requesting an exception to a faculty-established policy or academic deadline. You are required to provide evidence of compelling circumstances which would warrant approval. Present all information in a clear and concise manner and return your completed petition immediately.

Please note: the ARC does **not** consider the following to be circumstances which warrant an exception to the policies or deadlines:

- Dissatisfaction with a grade
- Dates that midterms/grades were given, posted or returned
- Ignorance/confusion about the deadline date
- Failure to carefully check registration and bills on *DuckWeb*

For approval of any petition, the following are mandatory:

- ✓ ~~Instructor signature~~ (Form submission from your UO email will serve as signature.)
- ✓ ~~Department stamp~~ (Instructors should forward the email to their department for department stamp.)

Please allow at least ten working days to be notified of a decision on your petition. If you have questions about a registration petition, contact a Student Records Specialist in the Office of the Registrar, 234 Oregon Hall, (541) 346-2935.

Petitions to withdraw from all classes or to withdraw with a W from a course after the term is over are reviewed by the Scholastic Review Committee. Contact the Office of Academic Advising, 101 Oregon Hall, (541) 346-3211.

STUDENT STATEMENT:

Explain why you missed the deadline. What extenuating circumstances justify granting this petition? Write legibly and attach a second page if needed.

I was waiting on office advancement to be allowed to take dissertation credits. Those approvals came through last night (8/4/2021 at 7pm), but I missed the email chain that occurred so I missed the deadline by one day.

Willing to pay fees required.

Send this completed form to your instructor from your UO email address. This will serve as your signature.

~~Student Handwritten Signature~~

~~Date~~

INSTRUCTOR STATEMENT - Please indicate why the requested action is appropriate.

Send this form to your dept. personnel from your UO email address. This will serve as your signature.

~~Instructor Handwritten Signature~~

~~Date~~

Please print instructor name:

Student Request to:**PETITIONS TO ADD:** Please be aware additional tuition and fees may be assessed.

EC 603	12207	Dissertation	None	NA	14
1. Subject	Course #	CRN	Title	Instructor	Graded or P/N Credits Year/Term
Email from instructor UO address serves as signature.					
Instructor Handwritten Signature (required for consideration)				Date	<div style="border: 1px solid black; width: 100px; height: 20px;"></div>
Please print instructor name: <u>None - sub department head</u>					
Dept Stamp indicated in email from department personnel using UO acct.					

EC 602	12206	Superv. College Teaching	None	NA	1
2. Subject	Course #	CRN	Title	Instructor	Graded or P/N Credits Year/Term
Email from instructor UO address serves as signature.					
Instructor Handwritten Signature (required for consideration)				Date	<div style="border: 1px solid black; width: 100px; height: 20px;"></div>
Please print instructor name: <u>None - sub department head</u>					
Dept Stamp indicated in email from department personnel using UO acct.					

PETITIONS TO DROP WITHOUT A RECORDED "W": Student must withdraw from the course before petitioning for no "W".

Subject	Course #	CRN	Title	Instructor	Graded or P/N	Credits	Year/Term
The instructor <u>MUST INITIAL</u> one of the following reasons for recommending the approval of this change:							
<div style="display: flex;"> <div style="width: 5%; text-align: right;">_____</div> <div>Student was ill or injured during the first week of the term and unable to drop the course before the deadline.</div> </div> <div style="display: flex;"> <div style="width: 5%; text-align: right;">_____</div> <div>Department changed the course meeting date/time and student was unable to participate.</div> </div> <div style="display: flex;"> <div style="width: 5%; text-align: right;">_____</div> <div>Student has not met the prerequisite(s) for this course. (Approval granted only within the first two weeks of the term.)</div> </div> <div style="display: flex;"> <div style="width: 5%; text-align: right;">_____</div> <div>Student was incorrectly placed at this level; registration in _____ is recommended.</div> </div> <div style="display: flex;"> <div style="width: 5%; text-align: right;">_____</div> <div>Student is enrolling in another section of the same course. (see ADD above)</div> </div> <div style="display: flex;"> <div style="width: 5%; text-align: right;">_____</div> <div>Other (Instructor statement required on reverse side)</div> </div>							
Email from instructor UO address serves as signature.							
Instructor Handwritten Signature (required for consideration)				Date	<div style="border: 1px solid black; width: 100px; height: 20px;"></div>		
Please print instructor name: _____							
Dept Stamp indicated in email from department personnel using UO acct.							

PETITIONS TO WITHDRAW WITH A RECORDED "W" (current term only): *** For past terms, contact Academic Advising, 364 Oregon Hall.

Subject	Course #	CRN	Title	Instructor	Graded or P/N	Credits	Year/Term
The instructor <u>MUST INITIAL</u> one of the following reasons for recommending the approval of this change:							
<div style="display: flex;"> <div style="width: 5%; text-align: right;">_____</div> <div>Student was ill or injured and unable to drop the course before the deadline.</div> </div> <div style="display: flex;"> <div style="width: 5%; text-align: right;">_____</div> <div>Other (Instructor statement required on reverse side)</div> </div>							
Email from instructor UO address serves as signature.							
Instructor Handwritten Signature (required for consideration)				Date	<div style="border: 1px solid black; width: 100px; height: 20px;"></div>		
Please print instructor name: _____							
Dept Stamp indicated in email from department personnel using UO acct.							

OFFICE USE ONLY

Approved <input type="checkbox"/>	Denied <input type="checkbox"/>	Petition Fee: _____
Student notified of tuition change <input type="checkbox"/>	SFAREGS <input type="checkbox"/>	SFAINDV <input type="checkbox"/>
Student Notified: Sent <input type="checkbox"/>	In person <input type="checkbox"/>	SFASLST/SHACRSE <input type="checkbox"/>
Comments: _____		
Received By: _____		Date: _____