

WEST LIBERTY UNIVERSITY - STUDENT PETITION

Name: _____ Student I. D. No: _____
(PLEASE PRINT)

Address: _____

Phone: _____ Advisor's Name: _____

Email: _____ Major: _____

I hereby petition the Committee on Admissions and Credit for the privilege of: (include course numbers)

For: *General Studies* _____ *Major* _____ *Minor* _____ *Program* _____ (check what petition refers to)

(Explain in detail all facts relating to your request, please attach a copy of the catalog description if class is transferred in from another Institution)

Student's Signature: _____ Date: _____

***GENERAL STUDIES REQUIREMENT PETITIONS: NO SIGNATURES REQUIRED – SUBMIT DIRECTLY TO THE ENROLLMENT SERVICE CENTER IN SHAW 121. ALL OTHER REQUESTS:**

APPROVED DENIED Dept. Chair: _____ Date: _____
(Please sign and print your name)

APPROVED DENIED College Dean: _____ Date: _____
(Please sign and print your name)

**** Student:** It is YOUR responsibility to return this signed petition to the Enrollment Service Center in Shaw Room 121. You and your advisor will receive an email stating the status of the petition.

Enrollment Service Center Use Only:

- Request has been approved.
- Request has been denied.

Comments: _____

Committee Chairperson's Signature: _____ Date: _____

UPDATED IN DEGREEWORKS: _____/_____