

University of California, Riverside

**College of Humanities, Arts, and Social Sciences  
Office of the Associate Dean-Student Academic Affairs**

**Student Petition**

(if completing petition electronically, you must print and file completed petition with the College Office)

**You will not receive a copy of this petition if it is approved. Contact the College Office in 5 working days to learn our decision.**

\_\_\_\_\_  
Name Student ID # Major

\_\_\_\_\_  
Address City State Zip Phone

Are you now in attendance at UCR? ( ) Yes ( ) No Expected Graduation Date\_\_\_\_\_

**I make the following request:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Reason:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Student's Signature Date

Action recommended by Advisor: ( ) Approve ( ) Disapprove  
(your written comments are necessary before the petition will be considered by the Dean's Office)

Justification:

\_\_\_\_\_  
Advisor's Signature Date

Associate Dean's recommendation: ( ) Approve ( ) Disapprove

\_\_\_\_\_  
Dean's Signature Date