

STUDENT PETITION FORM

To: _____

Student ID: _____

PERSONAL INFORMATION

Full Name: _____
 First Name Middle Name Family Name

Mobile No.: _____ LAU Email: _____

Degree: _____ Major/Emphasis: _____

SUBJECT OF THE PETITION (Tick Below)

- | | | | | |
|---|--|---|--|--|
| <input type="checkbox"/> Break Repeat Rule (LAC Core) | <input type="checkbox"/> Credits Overload (only if GPA<3 and not graduating) | <input type="checkbox"/> Follow old/new Program | <input type="checkbox"/> Late Drop/Add or Registraion | <input type="checkbox"/> Transfer of Credits |
| <input type="checkbox"/> Break Repeat Rule (Major Course) | <input type="checkbox"/> Extension for Thesis/Project deadline | <input type="checkbox"/> Exclude Grade from GPA | <input type="checkbox"/> Grace Semester (only max. 12 credits to graduate) | <input type="checkbox"/> Tutorial Course |
| <input type="checkbox"/> Course Substitution | <input type="checkbox"/> Extension for completion of Graduate Programs | <input type="checkbox"/> Intercampus Transfer (Beyond the deadline) | <input type="checkbox"/> Readmission (after Suspension or Dismissal) | <input type="checkbox"/> Waive Remedial Requirements |

Summary of the case: _____

Student's Signature: _____

Date: _____
 Day Month Year

*Use additional paper if needed *printed & signed copy

TO BE COMPLETED BY THE ADVISOR

Advisor's input _____

Name & Signature: _____

Date: _____
 Day Month Year

TO BE COMPLETED BY THE REGISTRAR'S OFFICE

Registrar's input _____

Signature: _____

Date: _____
 Day Month Year

SCHOOL/ COUNCIL ACTION

Approved Rejected by: _____
 Comment _____

Signature: _____

Date: _____
 Day Month Year