MALONE UNIVERSITY
Academic Petition

STUDENT NAME: _____ **DATE:** _____

First   Middle   Last

MAJOR: _____ **CLASS (check one):** ☐ FR ☐ SO ☐ JR ☐ SR ☐ Other

INSTRUCTIONS (in sequential order):

1. Complete the top portion of this petition and submit it to: a) the Academic Department Chair responsible for the course, major or policy under review, **OR** b) the Director of General Education if the request involves a course, component or policy pertaining to the Malone General Education Program. Attach any pertinent information or documentation that may support your request. Based upon the information submitted and other relevant factors, the appropriate authority will make a recommendation to affirm or deny the petition. Sign, date and forward the petition to the Office of the Registrar by email at **registrar@malone.edu**.

2. After assuring that the appropriate authority has completed the initial review of the request, the Registrar will review and comment based on institutional policy. Upon review, the Registrar will sign and forward the petition to the Associate Provost (for university-level action). No action is considered official until approved and signed by the Associate Provost. Should steps in this process be omitted or incorrectly processed, the Registrar will re-route the petition back to the appropriate authority for review and action.

3. The completed petition will be returned to the Office of the Registrar as a permanent record of the final action with a copy of the document being returned to the student.

I REQUEST PERMISSION TO (state specifically what you would like done):

RATIONALE (state in a clear and concise way why the above request should be granted and what supports your request):

Student Signature: _____ Date: _____

DEPARTMENT CHAIR/DIRECTOR OF GENERAL EDUCATION RECOMMENDATION (appropriate authority):

Signature: _____ Date: _____

REGISTRAR'S COMMENTS:

Signature: _____ Date: _____

ACTION OF THE ASSOCIATE PROVOST (appropriate authority):

Signature: _____ Date: _____