

GRADUATE SPECIAL PETITION LATE ACTION

Instructions for Submittal

Students are responsible for obtaining all necessary signatures and delivering this form to the Office of Graduate Studies. Please direct any questions or concerns to the Office of Graduate Studies: gradstu@uwgb.edu or (920) 465-2123.

- 1.) Students must complete all sections on the first two pages of this form, sign, save, and secure required signatures.
- 2.) Students may attach appropriate documentation (i.e. Add/Drop Card or Independent Study/Internship Form).
- 3.) The completed form must then be sent to the Director of Graduate Studies at gradstu@uwgb.edu.
- 4.) The final decision will be posted to the memorandum section of your transcript.

ACTION:	Registration	Add	Drop		Withdrawal		
STUDENT INFOR	RMATION:						
First Name		Middle Name			Last Name		
Student ID#				Campus E-m	ail		
Phone				Address			
City				State			
Zip Code							
Please select your program							
Current Academic Status (select one)							
Cumulative GPA				Earned Cred	its		
Semester for which you are requesting late action:				Required Dea	adline:		
Address the following questions:							

List the courses that you propose to register for, add or drop. (Limit 2250 Characters) $\,$

What circumstances prevented you from meeting this deadline? Attach appropriate document (i.e. medical excuse). (Limit 2250 Characters)
If requesting late registration or add, have you been attending the course? Have you met instructors to discuss joining the course late? Why do you need to add the course? (Limit 2250 Characters)
late? Why do you need to add the course? (Limit 2250 Characters)
If requesting to drop or withdraw, have you requested extra help from the instructor(s)? Have you regularly attended classes? (Limit 2250 Characters)

By signing below, I agree to pay consult with Student Billing (SS	y any and all additional tuition and S 1700) at (920) 465-2224 if you ha	fees or penalties resulting from approval of this petition. Please ave any questions.				
Student's Electronic Signature		Date (mm/dd/yyyy)				
Students are encouraged to see	ek the supporting signature of their	program, thesis or project advisor.				
SUPPORTING SIGNATURE: (Complete by Program Chair, Major Professor or Project Advisor)						
Comment: (Limit 2250 Characters)						
Major Professor or Project Adv	risor's Electronic Signature	Date (mm/dd/yyyy)				
	-					
ACTION BY THE OFFICE O	OF GRADUATE STUDIES: (For	Office Use Only)				
Petition Approved Decision:	Denied					
Action: (Limit 2250 Characters	s)					
Director of Graduate Studies' E	Electronic Signature	Date (mm/dd/yyyy)				
	U	. 3337				

Approval of this petition may affect your future financial aid eligibility. Contact the Financial Aid Office (SS 1200) at (920) 465-2075 for more information