PETITION TO RETROACTIVELY ADD COURSE(S)

Please print clearly.

Full Name: ____________________________  Sooner ID#: ____________________________
Address: ________________________________________________________________
______________________________________________________________
Phone #: ____________________________  Expected Date of Graduation: ______________
e-mail: ____________________________

May we contact you by e-mail about your petition?  ❑ Yes  ❑ No

Use this form to add a course from a previous term. For a request to change your enrollment for the current term, ask for the appropriate form. Please fill out this form completely according to the following steps:

1. On a separate page, print or type an explanation and justification of your request (Specifically, why do you think the request should be granted? What prevented you from accomplishing this before the deadline? What were the circumstances that led to this request?) Be specific, concise, and clear. Petitions that are illegible or poorly written may be returned without a decision.

2. Include your name and ID# on the separate page and any supporting documentation.

3. On the back of this form, indicate the course(s) and term and have your instructor(s) verify that you completed the course(s). Return this form (with instructors’ signatures), your explanatory page, and any supporting documentation to the Arts and Sciences Academic Services Office, Ellison Hall #124.

Please allow me to add the following course(s) for the ____________ semester (list the name and number for each course):

_________________________________________________________________________

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_________________________________________________________________________

_________________________________________________________________________

Student’s Signature: ____________________________  Date: ______________

FOR OFFICE USE ONLY
(Do not write in this section.)

Action by the Assistant Dean: _______ Approved _______ Denied
Signature: ____________________________  Date: ______________

Input # ______
Instructor’s Verification for Retroactive Add Request

Student’s Name: ___________________________  Sooner ID#: _________________

To instructor(s):

This student is requesting that s/he be added to your class retroactively. Your signature below will verify that the student completed the work in the class and earned a grade. (The first line shows an example.) It is not necessary to indicate the grade earned; the Office of Academic Records will contact you for that information if the request is granted. The student’s request will not be approved without your verification, but your willingness to allow the requested action does not necessarily mean I will grant the request. I will make that decision on the merits of the student’s circumstances.

If you have any questions, please call me at 325-1002.
Dr. Rhonda Dean Kyncl, Assistant Dean

<table>
<thead>
<tr>
<th>Dept/Course#-sec#</th>
<th>term</th>
<th>Instructor’s name (printed)</th>
<th>(signature)</th>
<th>date</th>
</tr>
</thead>
<tbody>
<tr>
<td>ENGL 1113-015</td>
<td>Sp04</td>
<td>John Smith</td>
<td>John Smith</td>
<td>06/01/04</td>
</tr>
</tbody>
</table>

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