WICHITA STATE UNIVERSITY APPLICATION FOR EXCEPTION TO CATALOG REGULATIONS

Name:	myWS U D:
Street address:	Major(s):
City, State, Zip:	
Phone:	Email:
This completed petition must be	submitted to an Advistoecords Office staff member no later than
We wi	I have the results a deleano later than
class(es); waiver of gradu	ICE the nature of your request (i.emission to the University; late drop of ation requents, etc.). Include the semester involved and the course name, blicabilitate #2 belowou must also include a typed request.

<u>Part II:</u> Justification for the request (attach documentation and additional pages). Incomplete petitions, or petitions which lack documentation, may not be acted upon or may be denied based on lack of supporting documentation. CHECKLIST:

I understand it is strongly suggested that I meet with an advisor prior to submitting my petition. I understand I also need to submit a 1 page (max) to stating the details areasons for my request. I understand I need to provide all appropriate documenta justify my claim (emails, invoices, letters, etc.) and the