

Name: _____
 Phone #: _____
 Cal Poly Email Address: _____
 Expected Degree Completion Term: _____
 (Ex: Spring 2015; Winter 2016)

Student Empl ID: _____
 Major: _____
 Concentration: _____
 Catalog Year: _____
 (Ex: 2011-13; 2013-15)

PLEASE USE:

_____ **Course Prefix & Number** (Ex: ENGL 1A) _____ **Title:** (Ex: English Composition) _____ **Quarter Units**

TAKEN AT TO BE TAKEN AT When: _____ Where: _____
 (Ex: Spring 2015) (Cuesta College)

If course is not a Cal Poly course, attach a course description and if possible, a syllabus.

TO SUBSTITUTE FOR:
(If applicable)

_____ **Course Prefix & Number** (Ex: ENGL 134) _____ **Title:** (Ex: English: Writing Exposition) _____ **Quarter Units**

Reason for Substitution: _____

If the course is also being used to satisfy a GE requirement, which GE Area? _____ (Ex B2, D5, C4)

I acknowledge that approval would not alter prerequisites for future courses in my major or change the total number of units required in residence or for my graduation.

Student's Signature _____

Obtain Signatures in the Order Listed: (Recommenders may attach documents or comments to this form)

I DO <input type="checkbox"/>	I DO NOT <input type="checkbox"/>	RECOMMEND APPROVAL	_____
I have consulted with the student about the petition. <input type="checkbox"/>			Student Advisor's Signature
I DO <input type="checkbox"/>	I DO NOT <input type="checkbox"/>	RECOMMEND APPROVAL	_____
Need for this signature VARIES . Check with your advisor.			Chair of Dept (offering required course) Signature
I DO <input type="checkbox"/>	I DO NOT <input type="checkbox"/>	RECOMMEND APPROVAL	_____
			Student's Dept Chair/Head Signature
I DO <input type="checkbox"/>	I DO NOT <input type="checkbox"/>	RECOMMEND APPROVAL	_____
			Student's College Dean Signature
			Date

The Office of the Registrar will forward this petition to the Associate Vice Provost ONLY IF signature is required.

I DO _____ I DO NOT _____ APPROVE _____
 GE/VP Signature _____ Date _____