

**NOTE: Download the form before populating the fields.**

Date \_\_\_\_\_

**Student details**

Name (Last, First Middle)		ASU ID number (10-digit, found on Sun Card)	
<input type="text"/>		<input type="text"/>	
ASU email		Phone	
<input type="text"/>		<input type="text"/>	
Current major	Academic unit	Location	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Total ASU hours completed <input type="text"/>	ASU hours currently enrolled <input type="text"/>	Total transfer hours <input type="text"/>	ASU GPA <input type="text"/>
		Catalog year <input type="text"/>	Anticipated graduation date <input type="text"/>

**Course details**

College or school level approval is final. If disapproved, forward to University Standards Committee with comment for final decision.

Prefix <input type="text"/>	Number <input type="text"/>	Title <input type="text"/>	Could another course be taken toward degree? Yes <input type="radio"/> No <input type="radio"/>
			If so, which course(s)?
			<input type="text"/>
First attempt	Year	Grade	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Second attempt	Year	Grade	Request third attempt
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
			Year <input type="text"/>
			Location <input type="text"/>

Concisely explain how you will be better prepared to succeed in this attempt. Give all pertinent information.

**Supporting documents and signature**

Required supporting documents:  Unofficial transcript      Optional documents:  Page three included  
 Graduation audit (DARS)

Student signature \_\_\_\_\_

Date \_\_\_\_\_

### Advisor recommendation

Advisor recommendations and required signature. If advisor signature is not available, an Academic Unit representative **must** complete and sign the next section.

Recommendation

Comments

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Advisor signature

Date

### Academic unit recommendation

Academic unit recommendation and academic unit representative signature, if the advisor signature is not provided.

Recommendation

Comments

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Academic unit representative signature

Date

### College or school standards committee

College or school standards committee recommendation and required signature.

Recommendation

Comments

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Standards committee representative signature

Date