

## **Undergraduate Standards Committee Petition**

NOTE: Download the form before populating the fields. Student details	Term to be effective	Date
Name (Last, First Middle)	ASU ID numbe	r (10-digit, found on Sun Card)
ASU email	Phone	
Current major Academic unit		Location
Total ASU hours currently enrolled ASU hours for hours	Catalog year	Anticipated graduation date
University petitions		
Received and reviewed by college or school, forward to University Sta	andards Committee with comr	nent.
Adjustment to the university graduation requirement	Transfer credit	
O Minimum credit hours (120 total).	O Acceptance of non-tra	ansferable credit.
O Minimum upper-division credit hours (45 total).	O Adjustment of transfe	
O Cumulative 2.00 ASU GPA.	O Requirements for sec	
O Residency hours (30 min. and 56 min. honors).	Reject transfer credit.	
O Substitute general studies requirement.	Prefix Numb	per Title
Use course for general studies requirement	Other, please explain	
	Other, picuse explain	
Prefix Number Title		
Semester completed Year Grade		
Contester completed Tear Crade		
La thia a transfer acure 2 Vac O Na O		
Is this a transfer course ? Yes No Required documentation:		
Course syllabus (from the same semester and instructor		
<ul><li>with whom you took the course).</li><li>General Studies Criteria Check Sheet (Filled out, signed</li></ul>		
and dated by the professor, department chair		
or chair designee).		
Concisely explain your request.		
Supporting documents and signature		
Supporting documents and signature		
<u>_</u>	Optional documents: ☐ Page	three included

Student signature

Date

Advisor recommendation			
Advisor recommenda complete and sign th	ations and required signature. If advisor signature i e next section.	s not available, an Academic Unit representative <b>must</b>	
Recommendation	Comments		
Advisor signature		Date	
Academic unit r	ecommendation		
Academic unit recom	mendation and academic unit representative signa	ature, if the advisor signature is not provided.	
Recommendation	Comments	<u>, , , , , , , , , , , , , , , , , , , </u>	
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Academic unit representative signature		 Date	_
Academic drift repres	eritative signature	Date	
College or scho	ol standards committee		
College or school sta	ndards committee recommendation and required s	signature.	
Recommendation	Comments		
Standards committee	e representative signature	 Date	
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