DEAN’S OFFICE PETITION FORM

After completing the form, obtain faculty and advisor signatures and deliver the form to the Registrar’s Office. They will send it to the Dean of the Faculty for her review.

Name: ___________________________________________ Class Year: 20___ Campus Box: ________
SBC ID: _______________ Major: _______________________________________________________
Advisor: __________________________________________________________________________

Request: If adding, dropping or withdrawing from a specific class, please circle which action and also provide the following information and reason:

Title: ___________________________ CRN: _______ Course ID: _______ Section: _______
Other Request: ____________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________
Reason for Request:
________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________

Signatures: __________________________ Date __________ Approved ☐ Not Approved ☐
Faculty: __________________________  __________________________
Advisor: __________________________  __________________________
Registrar __________________________  __________________________

Faculty may use reverse side for additional comments.

Dean’s Office Use Only:

Your request has been: ☐ Approved ☐ Denied

________________________________ Date __________________________
Dean of the Faculty

Distribution:
☐ Dean’s Office (original) ☐ Registrar
☐ Advisor ☐ Student
☐ Faculty