



DEPAUW UNIVERSITY
REGISTRAR'S OFFICE

PETITION FORM

Student _____

Student ID# _____

Expected Graduation Date _____

Class Standing: FY SO JR SR

Petition applies to: Fall Winter Spring May Summer Academic Year _____

Instructions: Complete this petition and obtain required signatures. Include explanation in the area provided or in an attached document. You may attach supplementary statements from instructors, advisers, counselors, etc. or ask them to email their comments to the Registrar's Office, registrarsoffice@depauw.edu.

Important: If petition is to ~~0d) 3d(n)Tj3d(Td(t)Tj3d(n)T3T2~~

