



WEBER STATE UNIVERSITY

Registrar's Office

SSC 101

(801) 626-6100 / Fax: (801) 626-6679

E-mail: academicpetitions@weber.edu

Academic Petition

Exception to University Policy

Student Information

Name: _____

Student ID: W _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Email Address: _____@mail.weber.edu

Reason to request an exception to university policy:

- Because of:
- ☐ Medical
 - ☐ Death in the family
 - ☐ Military obligation
 - ☐ Personal/Family
 - ☐ Other
- Are you:
- ☐ a federal financial aid recipient?
 - ☐ a scholarship recipient?
 - ☐ a WSU student athlete?
 - ☐ an international student?
 - ☐ receiving Veteran's benefits?

*Students receiving financial aid, scholarships or Veteran's benefits may be required to repay all or part of their tuition.

Graduation:

- ☐ Degree posting date ☐ Requirement ☐ Other

Please explain separately. (i.e., missed the application deadline; would like .334 credit waived.)

Registration/Records:

- ☐ Add ☐ Cancel ☐ Withdraw ("W") ☐ Complete Withdrawal

List class(es)

CRN

CLASS

20 _____

- ☐ Summer (May - Aug)
☐ Fall (Aug - Dec)
☐ Spring (Jan - Apr)

PLEASE SUBMIT YOUR EXPLANATION AND SUPPORTING DOCUMENTATION WITH THIS FORM.

Student Signature _____ Date _____

Office use only

- ☐ Approved ☐ Denied ☐ Modified

Comments:

Registrar's Signature _____ Date _____

Student's Name