

Academic Petition Form

(May 10, 2018)

For Office use only

		Date received	Staff
Please print! Date: Term of Pe	tition		
Name	Student ID number:		
Address			
			·
City	State		Zip
Cell	Email		
I request the following exception(s) to the acade (Please state specifically and completely what you policy, please cite the policy. State what action you request should be granted). Supporting document will review the petition.	u are requesting. If you a ou want the college to tal	re requesting an exception se on this request and why	you feel this
Reason for petition			
List supporting documents attached			
Student Signature Date	Advisor/C	ounselor	Date
Submit this form to the Records Office when controls before being considered by the committee.	ompleted. All supporti	ng documentation must	be attached
Action by Administration			
Approved Not Approved	Approved with con-	ditions	
Comments			
Vice President, Academic Affairs or Designee	Date R	egistrar	Date
Records Office Action			
Presidential Appeal If the student is not satisfied with the Fond du Lac student may appeal to the President.	c Tribal and Community	College Petition Commit	tee decision the
		otes:	
President Date	2		

System-Level Appeal

If the student is not satisfied with the Fond du Lac Tribal and Community College transfer appeal decision, the student may submit a request to the Minnesota State Senior Vice Chancellor of Academic and Student Affairs for a system-level appeal.

Copies: Records Financial Aid Business Office