

The Tseng College Change of Schedule Petition

Office Use Only

Current* Retroactive* Term _____ Year _____

Open University Winter Term Spring Special Session

Summer Session Extension Credit Special Session Degree /
Credit Certificate

Last Name First Name ID Number Career

Plan (Major) Telephone Number Email Address

Subject	Catalog Number	Class Number	Add For		Change To		Drop	Instructor's Signature	Date
			Grade	CR/NC	Grade	Cr/NC			

_____ Units Before Change _____ Units After Change _____ Financial Aid Recipient _____ Athlete

Student's justification for change:

I understand that forgery, alteration, or misuse of university documents or records, or knowingly furnishing false information constitutes a violation of the CSU Student Conduct Code.

Student Signature Date

Administrative Comments:

Dept. Chair/Director of the college offering the course Date _____ Approve Deny

Associate Dean of the college offering the course Date _____ Approve Deny

(Depending on Course Level)

AVP Undergraduate Studies _____ Date _____

OR

AVP Graduate Studies _____ Date _____

Current — *requires the signatures of:

Instructor

Department Chair of the college offering the course

Associate Dean of the college offering the course

Retroactive — *requires the signatures of:

Instructor

Department Chair of the college offering the course

Associate Dean of the college offering the course

Appropriate AVP