

CALIFORNIA STATE UNIVERSITY, SAN BERNARDINO

PETITION TO DROP A CLASS AFTER THE CENSUS DATE

A separate petition with documentation must be completed for each class to be dropped. Present this petition to the instructor and department chair of the class for approval. Upon approval, present the petition to the Dean/Associate Dean of the College in which you are majoring or to the Office of Advising and Academic Services, UH-380, if you are an undeclared undergraduate. **THIS IS NOT A PETITION FOR A REFUND.**

NAME _____ DATE _____
 ADDRESS _____ TELEPHONE _____
 CITY, STATE _____ ZIP CODE _____ STUDENT ID # _____

UNDERGRADUATE _____ **POSTBACCALAUREATE (GRADUATE)** _____

Major _____ **Unclassified** _____ **Classified** _____
 If Classified, Which program / credential _____

Call Number _____ Course # _____ Course Title _____

Day/Time Class Meets _____

Quarter/Year course taken _____ I am currently enrolled in _____ (total number) units

CHECK APPLICABLE REASON FOR PETITION

Illness Work Conflicts Military orders Other _____

Describe in detail reason for petition. (Supporting documentation must be attached.)

Student Signature **Date**

DEPARTMENT CHAIR & COURSE INSTRUCTOR

Student attendance record _____ Approximate grade in course to date _____

Approve Disapprove
 Reason: _____

Approve Disapprove
 Reason: _____

Instructor Signature **Date**

Department Chair Signature **Date**
 (Department Chair of the class)

DEAN OF THE COLLEGE IN WHICH YOU ARE MAJORING

Approve Disapprove Reason: _____

CNS TIME STAMP

Dean / Associate Dean's Signature **Date**