PROCEDURES FOR PETITIONING NOTE: Students are expected to fulfill the requirements of the particular program which they have selected.

1. A petition should be submitted in all cases which require departure from the prescribed program of studies. Requests for substitution, waivers of prerequisites as well as modifications must follow a petitioning procedure. The copy of the petition serves as a record of the student’s academic history and should be useful in completing the Major Form.

2. To be eligible to petition for waiver of graduation requirements, the student must be a senior, 90 units or more, and the hardship must be such as to cause the delay of one semester or more in graduation. Petitions may be considered at any time under unusual circumstances.

3. The student obtains the form in SPX 56, completes it and leaves it with his/her adviser.

4. The adviser carefully screens the petition for accuracy, completeness and justification. He/she either returns the petition to the student for corrections or additions or signs it.

5. The adviser submits the form to the Major Program Coordinator. In order for a petition to be considered in relation to a class for a given semester, it should be submitted before noon of the final day of the first week of classes.

6. Petitions related to the substitution of courses completed at another institution must be accompanied by a course outline and other materials which would be meaningful in the evaluation of equivalency.

7. The Major Program Coordinator, after consulting with faculty members concerned with the petition, acts upon the petition, within one week, if possible. The student and/or adviser might be requested to appear at a meeting.

8. The original petition is transmitted to the adviser, who after noting the action, places it in the student’s folder. The second copy is received by the student.

9. If the petition is approved, it is the adviser’s responsibility to record the program change in the student’s permanent advising folder.
SAN JOSE STATE UNIVERSITY
Department of Kinesiology

PETITION FOR PROGRAM CHANGE
COURSE SUBSTITUTION

Date __________________________

Student’s Name ____________________________________________

Last First Middle Initial

Student ID Number ____________________________________________

Local Address _______________________________________________

Street, City, State, Zip

Phone __________________________ Adviser __________________________

Class standing (circle one): Fr. Soph. Jr. Sr. Grad.

Total number of units completed _______ Units completed at SJSU _______

Proposed date of graduation ________________ (month and year)

Concentration: _________________________________________________

Program Objective: Credential _____________ Special ___________________

Statement of requested change:

Justification of request:
Other pertinent information: (State tests and/or classes taken in efforts to fulfill requirement. Be specific: include dates, class numbers and titles, and all information pertinent to request.)

Adviser’s Signature

Action taken: Approved ________ Disapproved _________ Date __________

Conditions or remarks:

Signature of Major Program Coordinator

1/06 - wjk