



Instructions

- 1. All fields must be completed. If any fields are incomplete, form will be returned. Resubmission of form will be held to current deadline requirements.
2. You must follow all add deadlines and attach appropriate enrollment form as necessary, e.g., Pre-Census Date or Post Census Date Petition for Late Enrollment.
3. You must pay all fees as required, e.g., registration, late fees.
4. Courses in which a "C or better" grade (C- not included) was earned on the first attempt are never repeatable unless they are designated repeatable for credit.
5. Grade Forgiveness is automatic (effective Fall 2009) if applicable. See University Policy F08-2 for complete descriptions: (http://www.sjsu.edu/senate/docs/F08-2.pdf).

STUDENT must submit completed petition to "R" counter in the Student Services Center (SSC).

SJSU ID _____ Name (print) _____
Major _____ Phone (cell preferred) _____ E-mail _____

Total currently enrolled units: _____ (attach MySJSU listing of currently enrolled classes and their units)

Course Information for all additional courses that you are seeking to repeat in term/year e.g. Fall'17: _____

Table with 5 columns: 5 digit Class Number (Schedule Code#), Course Subject & Course Number e.g. ENGL 1A, Section Number, Number of Units, Add Code. Includes a Total row.

Please indicate YES or NO for each of the required items for submission of a completed petition

Form with YES/NO columns and Required Items: This is the current version of the petition (http://www.sjsu.edu/registrar/forms/), SJSU transcript (unofficial is OK) attached with all prior SJSU attempts highlighted, I am a graduating senior (documentation may be requested by instructor), All the information I have provided in this petition is truthful and complete. Includes a section for Reason that you need this class (e.g., major, minor, GE) (optional):

Student's signature: _____

For Major Advisor or Chair: *If approval is recommended, an add code must be provided (above) for each course to be repeated.

Do you recommend approval for repetition of all classes listed above? [] Yes [] No
Comments (optional): _____

Major Advisor's or Chair's Printed name *Signature Date Phone

For Associate Dean of your major:

Do you approve the repetition of all classes listed above? [] Yes [] No
Comments (optional): _____

Associate Dean's Printed name Signature Date Phone