

## Cuyamaca College International Student Petition

Name \_\_\_\_\_

ID # \_\_\_\_\_

Address: \_\_\_\_\_

Phone# \_\_\_\_\_

Email \_\_\_\_\_

Major: \_\_\_\_\_

Goal: \_\_\_\_\_

Certificate/Associate Degree/Transfer to University

**Reason for Petition**

- |  |  |
|--|--|
| <input type="checkbox"/> Permission for Reduced Course load<br><input type="checkbox"/> Final Semester<br><input type="checkbox"/> Graduating/goal completion<br><input type="checkbox"/> Transfer<br><input type="checkbox"/> Early Exit<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Permission for over 18 units<br><input type="checkbox"/> Non-Normal progress (below 2.0)<br><input type="checkbox"/> Other _____ | <input type="checkbox"/> Change Major<br>New Major _____<br><input type="checkbox"/> Work on campus<br><input type="checkbox"/> Extension of Stay<br><input type="checkbox"/> Transfer to a different Academic<br>Institution<br><input type="checkbox"/> Take class(s) at a different college<br><input type="checkbox"/> Optional Practical Training (OPT) |
|--|--|

In the space below, please explain the reason for your petition. You may attach any additional documentation you feel important to your petition. Use additional paper if needed.

Student's signature \_\_\_\_\_ Date \_\_\_\_\_

Counselors Comments:

Counselor's signature \_\_\_\_\_ Date \_\_\_\_\_

Committee Actions:              Approved              Disapproved              Tabled

Comments: \_\_\_\_\_

\_\_\_\_\_

Date Rcv'd \_\_\_\_\_ By \_\_\_\_\_ Date Processed \_\_\_\_\_ By \_\_\_\_\_