



**SECTION B (Must be completed by a counselor)**

Social Security Number: \_\_\_\_\_

Please complete this section and return the petition to the student. In order to determine the student's eligibility for further financial aid, we need your assistance in evaluating the student's educational objective and academic qualification(s) to complete the proposed program of study as indicated in Section A.

**Certificate**

Has the student met the requirements necessary to receive a certificate?  Yes  No  N/A

What is the estimated date that the student could complete the required course work necessary for a certificate? \_\_\_\_\_

How many additional units are needed to complete a certificate? \_\_\_\_\_

**AA/AS**

Has the student met the requirements necessary to receive an AA/AS Degree?  Yes  No  N/A

What is the estimated date that the student could complete the required course work necessary for an AA/AS Degree? \_\_\_\_\_

How many additional units are needed to complete the AA/AS Degree? \_\_\_\_\_

**Transfer**

Has the student met the requirements necessary to transfer to a four-year university?  Yes  No  N/A

What is the estimated date that the student could complete the required course work necessary to transfer? \_\_\_\_\_ How many additional units are needed for transfer? \_\_\_\_\_

**General Academic/ESL**

Do all of the courses listed below meet the student's educational objective at Cuyamaca College?  Yes  No

Has the student completed any remedial course work?  Yes  No

Has the student completed any ESL coursework?  Yes  No

The student plans to take the following courses at Cuyamaca College:

**FALL 2009**

**SPRING 2010**

Course	Units	Course	Units

**Please attach unofficial transcript**

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

\_\_\_\_\_  
COUNSELOR'S SIGNATURE PRINT NAME DATE

**OFFICE USE ONLY**

**PETITION APPROVED: (mark all that apply)**

- Fall only. Student must petition for Spring semester
- Fall semester on probation
- Spring semester on probation
- Final semester of financial aid eligibility
- Final year of financial aid eligibility

**PETITION DENIED: (mark all that apply)**

- History of non-normal academic progress (GPA <2.0 and/or excessive deficient units)
- Exceeded the maximum unit limit (71 completed or 90 attempted)

**COMMENTS:** \_\_\_\_\_ **ESL:** \_\_\_\_\_ **REM:** \_\_\_\_\_

FA Advisor: \_\_\_\_\_ Date: \_\_\_\_\_ Second Review: \_\_\_\_\_ Date: \_\_\_\_\_