

## Petition for Exception

Name: \_\_\_\_\_

Student ID Number: \_\_\_\_\_

UMKC E-mail Address: \_\_\_\_\_

Contact Number: \_\_\_\_\_

**STEP ONE:** I am petitioning for (please mark all that apply):

\_\_\_\_\_ the review of a course from another institution to fulfill a UMKC requirement. Student must provide copy of the course syllabus with this request.

Course(s) to be reviewed \_\_\_\_\_ (for example—ENGL 101, Introduction to Composition I)

Institution(s) where completed \_\_\_\_\_ Term(s) Completed \_\_\_\_\_

I would like this course to be considered for \_\_\_\_\_

\_\_\_\_\_ consideration of a request to take a course or courses at another institution during a semester in which I will also be enrolled at UMKC (Concurrent Enrollment).

Course(s) \_\_\_\_\_ (for example—ENGL 101, Introduction to Composition I)

Institution \_\_\_\_\_ Term \_\_\_\_\_

\_\_\_\_\_ a course substitution. Course completed \_\_\_\_\_ Please consider this course for \_\_\_\_\_

\_\_\_\_\_ a break in the University's Residency Requirement.

\_\_\_\_\_ late enrollment in a course. Note: Instructor approval on an add/drop slip is also required.

Course(s) to be added \_\_\_\_\_ Term \_\_\_\_\_ Total # Hrs for Term \_\_\_\_\_

\_\_\_\_\_ late withdrawal from a course. An add/drop slip with instructor signature and a notation of "W" or "WP," withdraw passing or "WF," withdraw failing is also required.

Course(s) to be dropped \_\_\_\_\_ Term \_\_\_\_\_ Total # Hrs remaining this term \_\_\_\_\_

Are you an international student? Yes No International students are responsible for ensuring that dropping this course (or these courses) will not result in their under-enrollment. If so, the student is responsible for completing a Full-Time Equivalency form (available on the ISAO website). The FTE form must be submitted with the request to drop the class.

Students who receive financial aid or an institutional scholarship should check with the UMKC Financial Aid and Scholarships Office to learn if and how this action will impact eligibility for aid in the future.

\_\_\_\_\_ an overload of hours. Total number of hours proposed \_\_\_\_\_ Term \_\_\_\_\_. Please list proposed courses in Step Two on the back of the page.

\_\_\_\_\_ other consideration. Please explain your request in Step Two on the back of the page.

**STEP TWO:** Use the space below to explain the reasons for your petition. You can provide supplemental documentation to support your request.

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Student Signature \_\_\_\_\_ Date \_\_\_\_\_

**Please note: Some petitions require review beyond the Student Services Office so decisions may not be immediately available. Students will be notified via UMKC e-mail of the decision on their petition. Submitting a petition for exception does not guarantee the request will be approved.**

***For Student Services use:***

Previous petitions considered \_\_\_\_\_

Reviewer's Comments \_\_\_\_\_

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Reviewer's Signature \_\_\_\_\_ Date \_\_\_\_\_

Student notified of decision by \_\_\_\_\_ Date \_\_\_\_\_ Notice to Registrar's Office: Yes / Not Needed