**Petition for Exceptions to Registrarial Policies or Procedures**

This form is to request exceptions to Registrarial policies or procedures only. Requests for waivers of academic requirements and policies must be submitted in writing to the VP Academic Affairs and Provost. **Complete and submit this form, with all supporting documentation, to the Registrar.** To avoid processing delays, attach Add forms, Applications for Non-Enrolled Student Status, and other relevant documents.

<table>
<thead>
<tr>
<th>STUDENT NAME (Print)</th>
<th>STUDENT ID #</th>
<th>PHONE</th>
</tr>
</thead>
</table>

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<thead>
<tr>
<th>CIRCLE YOUR PROGRAM</th>
<th>CURRENT ENROLLMENT STATUS</th>
<th>INDICATE TERM FOR THIS REQUEST AND WRITE IN THE YEAR</th>
</tr>
</thead>
<tbody>
<tr>
<td>BA MAP-Clinical</td>
<td>□ Full-Time</td>
<td>[ ] Summer [ ] Fall [ ] Winter [ ] Spring YEAR</td>
</tr>
<tr>
<td>MAP-IC MAOM MAETC</td>
<td>□ Part-Time</td>
<td>[ ] MFA Summer/Fall [ ] MFA Winter/Spring</td>
</tr>
<tr>
<td>MAEx TC MFA USMA</td>
<td></td>
<td>[ ] USMA Winter/Fall [ ] USMA Spring/Summer</td>
</tr>
</tbody>
</table>

**Note:** Adjudication notification of this petition will be sent via Antioch University email within 30 days.

I would like to petition to (choose from the following):

- [ ] Register for the following class(es) after the last day of registration: ____________________________________________________________________________
  Reason for missing the registration deadline: ______________________________________________________________________

- [ ] Add the following class(es): _________________________________________________________________________________
  Reason for missing the add/drop deadline: __________________________________________________________________________
  (Note: To withdraw from a course(s) after the last day of add/drop, use the Course Withdrawal Form.)

- [ ] Register late for non-enrolled student status (LOA, EMS) (Attach a completed Non-Enrolled Student Status Form):
  Reason for missing the registration deadline: ______________________________________________________________________

- [ ] I have attached the following document(s) in support of this petition: __________________________________________________________________________
- [ ] Others (Please be specific and use back page, if needed) _____________________________________________________________________________

I understand that I am responsible for all fees connected with this petition, including a Special Services Fee, not to exceed $250, which may be assessed in addition to other applicable fees.

**Student Signature** ________________________________ **Date** ______________

**OFFICE USE ONLY**

[ ] Approved  [ ] Not Approved  [ ] Late Registration Fee charged  [ ] Special Services Fee Charged

**Registrar’s Signature:** ________________________________ **Date** ______________

[ ] Emailed Student with Decision  **Initials:** ____________________ **Date:** ______________

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Office of the Registrar, 400 corporate Pointe Ste., 2060, Culver City, CA 90230; Tel: (310) 578-1080 ext. 216; FAX: (310) 301-8403; Email: registrar.aula.antioch.edu