## Petition for Exception to Policies and Procedures

SANTA BARBARA 721 Cliff Drive Santa Barbara, CA 93109 805-962-8179

Please submit this form to Student Services (studentservices.ausb@antioch.edu) via your <u>antioch.edu</u> email account. Petitions concerning credit awarded changes will require approval of the course instructor, Program Chair, and Provost.

| Student name:   |                  |          | ID        | #:           |  |  |
|---|------------------|----------|-----------|--------------|--|--|
| Advisor name:   | Program:         | BA       | MACP      | PsyD         |  |  |
| Term & Year for which Petition Applies:   |                  |          | То        | oday's Date: |  |  |
| Course Number (if applicable):  |                  |          |           |              |  |  |
| Please list the policy or procedure for which you wish to request an exception: |                  |          |           |              |  |  |
| Example Policy: A course incomplete must be completed by                        | / the end of the | subseque | nt term.) |              |  |  |

Please list your requested exception to this policy or procedure: (Example Exception: I would like to extend the incomplete deadline for my Summer 2013 course from 12/21/13 to 3/22/14.)

Please explain your reason for requesting an exception to the above policy or procedure:

| Reason for previous petition for exception to academic policy: | Have you submitted a petition for exception to any academic policy before? | Yes | No |
|--|--|-----|----|
|  | Reason for previous petition for exception to academic policy:             |     |    |

Date

\*Note: Email approval is acceptable in lieu of a hard signature if provided via an antioch.edu email account.

| <b>.</b>                           | -                | -                                     | alents must receive approval of the instructor |
|------------------------------------|------------------|---------------------------------------|--|
| Instructor Decision:               | Approved         | Denied                                |  |
| Reason:                            |                  |                                       |  |
|                                    |                  |                                       |  |
|                                    |                  |                                       |  |
|                                    |                  |                                       |  |
|                                    |                  |                                       |  |
|                                    |                  |                                       |  |
|                                    |                  |                                       |  |
| Instructor Signature*              |                  | Date                                  | Instructor Name (Printed)                      |
|                                    |                  |                                       |  |
| Advisor Decision:                  | Approved         | Denied                                |  |
|                                    |                  |                                       |  |
| Reason:                            |                  |                                       |  |
|                                    |                  |                                       |  |
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|                                    |                  |                                       |  |
|                                    |                  |                                       |  |
| Advisor Signature*                 |                  | Date                                  | Advisor Name (Printed)                         |
|                                    |                  |                                       |  |
| Program Chair Decision:            | Approved         | Denied                                |  |
|                                    | Approved         | Defiled                               |  |
|                                    |                  |                                       |  |
| Reason:                            |                  |                                       |  |
|                                    | <del>2</del> *   | Date                                  | Program Chair Name (Printed)                   |
| Reason:<br>Program Chair Signature | 2*               | Date                                  |  |
| Program Chair Signature            | · • • •          |                                       |  |
| Program Chair Signature            | or credit awarde | – – – – – – – – – – – – – – – – – – – |  |
| Program Chair Signature<br>        | · • • •          |                                       |  |
| Program Chair Signature            | or credit awarde | – – – – – – – – – – – – – – – – – – – |  |
| Program Chair Signature<br>        | or credit awarde | – – – – – – – – – – – – – – – – – – – |  |
| Program Chair Signature<br>        | or credit awarde | – – – – – – – – – – – – – – – – – – – |  |
| Program Chair Signature<br>        | or credit awarde | – – – – – – – – – – – – – – – – – – – |  |
| Program Chair Signature<br>        | or credit awarde | – – – – – – – – – – – – – – – – – – – |  |