

General Student Petition

Admissions and Records: (707) 864-7171

email: admissions@solano.edu

Please review the instructions page for this petition for important information and required signatures for your request. After obtaining all required signatures, please submit to the Admissions & Records office for final approval.

Name:		Student ID #:
Last First	MI	Dhana Numban
Email Address:		Phone Number:
Applicable Semester or Term: ☐ Fall ☐ ☐Sp	oring Summer	Year:
Action Requested (mark one box only per p	etition):	
Carry an Excess Load Please indicate total number of unity above max: Spunits, Summer more than 12 units	Total ovoring/Fall more than 20	er max:
General Appeal	Reason	for appeal:
Add a Class Late (After Census)	Course	Name and CRN:
	_	
Student Signature:		
Student Signature: Faculty - Counselor - Division Dean Use		
Student Signature: Faculty - Counselor - Division Dean Use Faculty Comments:	e Only	Date:
Student Signature: Faculty - Counselor - Division Dean Use Faculty Comments: □ Recommend □ Do not recommend Facul	e Only Ity Signature:	Date:Date:
Student Signature: Faculty - Counselor - Division Dean Use Faculty Comments: Recommend Do not recommend Facul	e Only Ity Signature:	Date:Date:
Student Signature: Faculty - Counselor - Division Dean Use Faculty Comments: □ Recommend □ Do not recommend Facul Counselor Comments:	e Only lty Signature:	Date:
Student Signature: Faculty - Counselor - Division Dean Use Faculty Comments: □ Recommend □ Do not recommend Facul Counselor Comments: □ Recommend □ Do not recommend Coun	e Only lty Signature:	Date:
Student Signature: Faculty - Counselor - Division Dean Use Faculty Comments: ☐ Recommend ☐ Do not recommend Facul Counselor Comments: ☐ Recommend ☐ Do not recommend Coun Dean Comments:	e Only lty Signature:	Date:
I certify that I have read SCC's policies/cata Student Signature: Faculty - Counselor - Division Dean Use Faculty Comments: Recommend Do not recommend Facul Counselor Comments: Recommend Do not recommend Coun Dean Comments: Dean Comments: Approve Deny Dean Signature	e Only Ity Signature: Selor Signature:	Date:
Student Signature: Faculty - Counselor - Division Dean Use Faculty Comments: □ Recommend □ Do not recommend Facul Counselor Comments: □ Recommend □ Do not recommend Coun Dean Comments: □ Approve □ Deny Dean Signature:	e Only Ity Signature: selor Signature: gnature:	Date:

INSTRUCTIONS FOR STUDENTS

A **General Student petition** is used for reasons listed below:

- Carry Excess Load may be requested if student will exceed max unit count for the semester.
 Student must meet with a counselor to discuss options and receive a recommendation.
 Student and counselor signature required.
- General Appeal may be requested when the student does not agree with a prior decision on a petition/policy. Explanation and/or relevant documentation required. <u>Student signature</u> required.
- Add a Class Late (After Census) may be requested if a student needs to add a class after
 census date due to verifiable extenuating circumstances (computer error is not considered an
 extenuating circumstance). Student, Faculty, and Division Dean signatures required.

By signing this form, you acknowledge that you have reviewed our policies regarding your request on our website at www.solano.edu or in the Solano Community College catalog (available online).

After obtaining all required signatures, please submit to the Admissions and Records office for final approval.

Petitions submitted without proper documentation and signatures will be denied.

Please allow two weeks for processing.