

Retroactive Schedule Adjustment Petition: Graduate Students

Requests are retroactive if submitted after the last day of instruction
Response to all questions is required, incomplete petitions will be returned

Name: _____ Perm: _____ International Student Visa: _____

UCSB Email: _____ Current Major/Degree Objective: _____

Action: Add a course Change grading option from letter to S/U or P/NP (verify course grading options)
Withdraw from a course Change grading option from S/U or P/NP to letter (verify course grading options)

Course Details:

Qtr/Yr	Subject	Course #	Enrollment Code	Grade Option	Units	Instr. #	Instr. Name
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Please explain why you did not make this schedule adjustment by the last day of instruction*

Please explain the academic significance of this request*

*attach additional page if needed

Student Signature: _____ Date: _____

To be completed by INSTRUCTOR (please complete every section, incomplete petitions will be returned)

Student's attendance:	% of assignments completed:	Final exam/assignment completed:	Current letter grade:
Regular	Never		
Infrequent	Unknown		

Comments:

Approve
Deny Name: _____ Signature: _____ Date: _____

Home Department Graduate Advisor

Approve
Deny Name: _____ Signature: _____ Date: _____

Department Chair (only for courses in the College of Engineering: students wishing to take an undergraduate course with enrollment restrictions **must** have approval from the Chair of the Department offering the course)

Approve
Deny Name: _____ Signature: _____ Date: _____

Graduate Division Use Only:

Approve Signature: _____ Date: _____
Deny

Course is not required for the earned degree

Office of the Registrar Use Only:

Processed by: _____ Date: _____

UC SANTA BARBARA
Academic Services
Graduate Division