



DEPAUW UNIVERSITY  
REGISTRAR'S OFFICE

# PETITION FORM

Student \_\_\_\_\_

Student ID# \_\_\_\_\_

Expected Graduation Date \_\_\_\_\_

Class Standing: FY SO JR SR

Petition applies to:    Fall    Winter    Spring    May    Summer    Academic Year \_\_\_\_\_

Instructions: Complete this petition and obtain required signatures. Include explanation in the area provided or in an attached document. You may attach supplementary statements from instructors, advisers, counselors, etc. or ask them to email their comments to the Registrar's Office, [registrarsoffice@depauw.edu](mailto:registrarsoffice@depauw.edu).

Important: If petition is to ~~0d) 3d(n)Tj3d(Td(t)j33n)T3T2~~

