

California State University, San Bernardino  
**COLLEGE OF EXTENDED & GLOBAL EDUCATION**

**PETITION TO DROP AFTER THE CENSUS DATE**

**INSTRUCTIONS:** A Separate petition with documentation must be completed for EACH class being dropped. Present this petition to the instructor for signature, then the Department Chair for a signature. Upon Approval, present this petition to the College Dean/ Associate Dean in which the course resides for signature and then bring to SH-101 for final approval. **This is not a petition for a refund, no refunds given after census.**

**NOTE:** Dropping after census will assign a grade of "W" (withdrawal)

NAME \_\_\_\_\_ COYOTE ID # \_\_\_\_\_ TELEPHONE \_\_\_\_\_

**COURSE INFORMATION**

CLASS NUMBER \_\_\_\_\_ COURSE NAME AND SECTION# (i.e. Psych 100-01) \_\_\_\_\_ QUARTER & YEAR \_\_\_\_\_

COURSE TITLE \_\_\_\_\_ MAJOR \_\_\_\_\_ TOTAL UNITS CURRENTLY ENROLLED \_\_\_\_\_

STUDENT CLASS LEVEL: ( ) UNDERGRADUATE ( ) GRADUATE/POSTBACCALAUREATE

**REASON FOR PETITION**

Check Applicable Reason For Petition

( ) ILLNESS ( ) WORK CONFLICTS ( ) MILITARY ORDERS ( ) OTHER \_\_\_\_\_ Describe **in detail** reason for petition. (**Attach supporting documentation**)

**I understand that the petitioning procedures are for serious and compelling reasons.** \_\_\_\_\_

Student's Signature

Date

**INSTRUCTOR, DEPT CHAIR & COLLEGE DEAN OF THE COURSE**

( ) Approve ( ) Disapprove

Reason: \_\_\_\_\_

( ) Approve ( ) Disapprove

Reason: \_\_\_\_\_

( ) Approve ( ) Disapprove

Reason: \_\_\_\_\_

\_\_\_\_\_  
Instructor's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Department Chair's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Dean/ Associate Dean's Signature

\_\_\_\_\_  
Date

**FINAL PROCESS / CEGE OFFICE USE ONLY**

( ) APPROVED ( ) DENIED: Reason

Date:

Student Services Manager: \_\_\_\_\_

Date: \_\_\_\_\_

CEGE190321