



LATE ADD PETITION

Office of the Registrar

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 LMU ID NUMBER NAME (LAST, FIRST) SIGNATURE OF STUDENT DATE

 EMAIL PHONE *STUDENT ASSUMES FULL RESPONSIBILITY FOR FINANCIAL ADJUSTMENTS THAT MAY BE INCURRED TO THE STUDENT ACCOUNT BY THE APPROVAL OF THIS PETITION*

COLLEGE/SCHOOL BCLA CBA CFA FTV SOE FRSCSE LEVEL UG GR ND TERM FOR WHICH REQUEST IS BEING MADE FALL SPRING SUMMER I SUMMER II _____ YEAR

USE THE SECOND PAGE OF THIS FORM TO EXPLAIN WHY YOU ARE REQUESTING THIS EXCEPTION TO UNIVERSITY POLICY. THE FORM WILL NOT BE PROCESSED WITHOUT A DETAILED EXPLANATION. ATTACH ANY SUPPORTING DOCUMENTATION.

COURSE TO LATE ADD:

CRN DEPARTMENT COURSE NO. SECTION NO. SEMESTER HOURS

RECOMMENDATION: ACKNOWLEDGE APPROVAL DENIAL _____ COURSE INSTRUCTOR (SIGNATURE) _____ DATE

RECOMMENDATION: ACKNOWLEDGE APPROVAL DENIAL _____ COURSE CHAIR (SIGNATURE) _____ DATE

RECOMMENDATION: ACKNOWLEDGE APPROVAL DENIAL _____ COURSE ASSOCIATE DEAN (SIGNATURE) _____ DATE

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DETAILED EXPLANATION OF WHY YOU ARE REQUESTING AN EXCEPTION TO UNIVERSITY POLICY: _____

UNIVERSITY REGISTRAR'S ACTION: APPROVE DENY _____ UNIVERSITY REGISTRAR (SIGNATURE) _____ DATE