

College of Extended Education & Global Engagement

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PETITION OF STUDENT

Last Name First Name Middle Initial

Humboldt ID

Mailing Address

E-mail Address (required) Phone

Course Title _____ SEMESTER: FALL SPRING SUMMER

Subject Area & Catalog # _____ Course # _____

REQUEST:

REASON: (explain why your petition should be considered and provide documentation if available)

STUDENT SIGNATURE

DATE

College of Extended Education & Global Engagement

APPROVED

DENIED

BY: _____ DATE: _____

The final decision will be based on the merits of the petition and CSU, Cal Poly Humboldt, or State of California policy.

DEPARTMENT SIGNATURE