



**EXCESS STUDY LIST PETITION**

Name: \_\_\_\_\_ Major: \_\_\_\_\_  
(Last) (First) (Middle)

Student ID Number: \_\_\_\_\_ Quarter: \_\_\_\_\_

Highest number of units previously taken: \_\_\_\_\_ CUM GPA: \_\_\_\_\_  
(Quarter) (Year) (Units)

**REASON FOR THE REQUEST (required)**

Proposed Study List	Session (Summer Only)	Grading Basis	Units
<b>TOTAL REQUESTED UNITS</b>			

Last Quarter's Study List (must have grades)	Grade	Units
<b>TOTAL UNITS</b>		

Date: \_\_\_\_\_ Student's Signature: \_\_\_\_\_

Submit Online: [Petitions Message Center Queue](#)

Revised (4/2020)

Decision: \_\_\_\_\_, approved for \_\_\_\_\_ units. Unit Limit Updated

Date: \_\_\_\_\_ Signature: \_\_\_\_\_  
Associate Dean Initials