



Petition to the Committee on Academic Review

Scripps College
Office of the Registrar
Balch 121; (909) 621-8273

Name: _____ ID#: _____ Date: _____

Class Level: _____ Planned grad session/year: _____

The following are required for committee consideration:

- **State the nature of your petition.** *To which policy do you seek exception? Be specific.*
- Provide a **statement which supports your petition.** *Include a clear, typewritten statement which identifies reasons you believe an exception to policy should be considered.*
- A **statement from the faculty** member(s) involved, indicating whether and why the faculty supports or does not support your petition.
- A **statement from your academic adviser**, similar to the faculty statement, is also required.
- Provide **supporting documentation** as needed. If documentation is on file with the Dean of Students, please indicate so below.

Use the space below or include a typewritten document. Attach any supporting statements/documentation. Incomplete or illegible petitions will be returned to the student. Submit all materials to the Office of the Registrar.