

School of Engineering and Computer Science Academic Advising Office

255 Engineering Center 115 Library Drive Rochester, MI 48309-4479

Petition of Exception

Phone: 248-370-2201 | Fax: 248-370-2084 www.oakland.edu/secs

Instructions

1. Complete all available fields below electronically.

		Print and sign the form.it this form to the SECS Advising Of the committee, the student will recei		ail.
Student G#:	Last Name(s):		First Name(s):	
Street Address:		City:	State:	Zip:
OU Email:		Daytime P	hone:	
Catalog Year:	Major Degree	Program:		
	Second Major (if ap	oplicable):		
If 4th attempt, indicate	the semester you intend to repeat t	he course:		
Request:				
Reason (documentation	n and supporting reason may be att	ached to form):		
	Student Signature:			Date:
Supporting Adviser/Faculty Comments:				
	Adviser/Faculty Signature:			Date:
CC:		Disposition by the Committee		
Student Petition File		Conditionally Approved	Denied	
Registrar Student File Date Mailed:	Comments:			
Date Maneu.	Authorized Signature:		Date:	Revised 8/11/17