

For Counselor Use Only

(Please type or print)

Tentative Semester Program (must be filled out completely):

Approved Courses	Units	Alternate Courses	Units
COUN 140 C	1/2	COUN 060 C or 150 C	1 or 3

STUDENT IS REQUIRED TO COMPLETE A "PETITION FOR EXCEPTION" TO REPEAT THE SAME CLASS FOR THE 3RD TIMES. PLEASE ATTACH COMPLETED PETITION TO DISMISSAL FORM.

Maximum Units: _____ in Fall Spring Summer Year: _____ GPA: _____

Counselor's Justification:

Counselor Name (print) Extension Counselor Signature Date

Office Use Only

Approved Denied

Unit Limit: _____ in Fall Spring Summer Year: _____

Comments: _____

Admissions and Records Signature Date

Received By:	SOAHOLD:	Processed By:
Date Received:	SFAREGS:	Date Processed: