STUDENT COURSE PETITION CARD
(Fill Out Completely)

Last Name _______________________ First Name _______________________ B# ______________________

Local Phone Number/Cell _______________________ Email ______________________

Petitioned Course (Dept. & Number): ________________________

School of Student: _______________________ Student’s Academic Major: ______________________

IMPORTANT: It is your responsibility to ensure you are correctly registered. Check on BANNER to ensure your registration is complete.

Student Signature: ________________________ Date _______________

OFFICE USE ONLY:

Instructor Signature _______________________ Date _______________ Approved ____ Denied ____

IMPORTANT: If your schedule exceeds the maximum allowable credits, you will need to either drop a course(s) or submit a course overload petition (available through Harpur Academic Advising website).

**Please return this form to Ann in the Africana Studies dept, LT 1311**