

PETITION TO EXCEED MAXIMUM CREDIT HOUR LIMIT

January Intersession 2010

CENTER FOR
REGIONAL AND
CONTINUING
EDUCATION
 CSU, CHICO

Student's Name _____

Date _____

Student ID# _____

CSU, Chico, Matriculated (Admitted) Student _____

Non-matriculated Student _____

Phone# _____

Major _____ Level (e.g., Freshman) _____ GPA _____

INSTRUCTIONS

1. Complete form and obtain signatures.

____ Matriculated students: (1) faculty signature for all classes in proposed study list below, and (2) Department Chair for your major, or Academic Advising Office if your major is undeclared.

____ Non-matriculated students: (1) faculty signature for all classes in proposed study list below, and (2) Dean of Regional & Continuing Education.

2. Submit this completed form to Regional & Continuing Education. You will be notified upon approval or denial.
3. It is expected that you have a GPA of 2.75 to be considered.

PROPOSED STUDY LIST FOR INTERSESSION

Subject	Course#	Section	Units	Faculty Signature

REASON FOR REQUEST TO EXCEED MAXIMUM UNIT LIMIT:

***Depending on whether you are a declared, undeclared, or non-matriculated student, you must obtain **one** of the corresponding signatures of approval.

Dept. Chair of Major (declared) _____ Date _____

Academic Advising Office (undeclared) _____ Date _____

Dean of Continuing Ed. (non-matric.) _____ Date _____

Return Completed Form to:
Center for Regional & Continuing Education
530.898.6105