



Northwest UNIVERSITY

5520 108th Avenue NE • P.O. Box 579 • Kirkland, WA 98083
fax: (425) 889-5200 • provost@northwestu.edu

STUDENT PETITION FOR GENERAL ACADEMIC MATTERS

Dear Student:

Your petition will be handled as quickly as possible. During the decision making process we will be consulting with several sources, including the Registrar's Office, your current and transfer transcripts, graduation audits and possibly catalogs from previous institutions attended. Since all actions must be done in writing this process may take several weeks. Please complete the following information to assist us in acting upon your petition.

Date: _____

Full Name _____ **ID #** _____

Program: Kirkland Undergraduate, Salem, Sacramento, Adult Evening, Online, CPP , Graduate
(please circle one)

Current Mailing Address (or Campus Box #) _____

E-Mail Address _____ **Phone # (_____)** _____

Current GPA _____ **Advisor** _____

Current Semester _____ / _____ **Number of credits for current Semester** _____
(Term) (Year)

Number of credits: Completed at NU _____ **Transferred to NU** _____

Academic Major _____

Academic Minor (if applicable) _____

In writing your petition, be sure to provide as much pertinent information as possible, as we do not have all of your records immediately before us. The more information included on the petition, the more likely we will be able to expedite your petition. If necessary we will schedule an appointment with you for further clarification.

If you are requesting a waiver because of coursework taken at another institution, please attach a copy of their catalog showing the course number, title and description and a copy of the course syllabus. If these are not available, please provide as much information as possible.

If this request is because of a medical situation, please attach a signed note from your doctor.

Thank you for your cooperation.

Jim Heugel
Provost

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To the Provost:

I respectfully request:

Reason(s) for this request:

Approval of this request will help me, because:

Student Signature

If this petition is submitted in consultation with your academic advisor or a faculty member, please include their signature and pertinent comments.

Advisor/Faculty Signature

Action:

_____ Approved

_____ Not Approved

_____ Conditions

Provost Signature

Date

cc: Student _____

Student Accounts _____

Registrar _____

Online Campus Advisor _____

Advising (Trad or CAPS) _____

Other _____