Request for Administrative Action

Semester: O Fall O Spring O Summer Year:



Date:

							COL	LLUI		1_/ 1 VV
Name:					AUID:		AU Email:			
Academic Level:	FT	РΤ	1L	2L	3L	4L	F-1/J-1 Visa Holder	· Yo	es	No
Divisional Shift • Permanent chan • Be aware of the • Explain below y	residency	ther divis	ent policy	and th	e divisional					
Overload Reque For full-time JD For part-time st List course(s) fo Explain below y	students udents to or which ye	request 1. ou need o	2 or more overload p	credits ermissi	s for the cur	rent term.	ocumentation).			
Course # (i.e. LA	W 123-0	04)				Course	e Title		# (of Credits
Reduce to Part 7 • For full-time JD • For part-time str • Be aware of the	students udents wa	wanting to t	ake less th	ian 8 ci						
Number of intend	led credi	ts:								
Yes, I request	to petiti	on to us	se my ea	rned s	summer cı	edits to s	atisfy the residency requi	irement	•	
	t if I am a	financia	l aid recip lease note	ient m institu	y cost of atte	endance wi s capped at	ent Reductions to Part Time I Il be adjusted to reflect the up tuition and federal financial ements.	dated reg		
Student Signa	ture Fo	or Abo	·		, ,					
Student Signature:								Date:		
				C	Office Us	se Only				
Number of credits needed for 86 credit requirem						:				
Advisor:			Sig	natur	e:			Date:		
Financial			Sig	natur	e:			Date:		

Note: ISSS Signature required when J-1 or F-1 students drop below 8 credits

ISSS Signature:

Aid:

ISSS Name: