

EXCEPTIONS ARE RARE  
AND MADE ONLY FOR  
DOCUMENTED,  
COMPELLING,  
NON-ACADEMIC REASONS

**University of New Hampshire**  
**UNDERGRADUATE ONLY**  
**PETITION FOR VARIANCE IN ACADEMIC POLICY**

Today's Date:

UNH Email

STUDENT I.D. NUMBER   
STUDENT NAME  LOCAL ADDRESS

College/School  LAST  FIRST  MI

Major/Curriculum/Dept.

I request

TELEPHONE

Course

Reasons for this request  Semester *If Applicable*

Signature

USE REVERSE SIDE IF NECESSARY

DO NOT WRITE BELOW THIS LINE

Instructor's Comments

Instructor Signature  Date:

Advisor's Comments

Advisor Signature  Date:

Associate Dean (or Administrative Officer) signature  Date:

- Action  
 Approve  
 Deny

**LOCATIONS FOR ASSOCIATE DEANS:**  
COLA MURKLAND 110; COLSA RUDMAN G05; CEPS KINGSBURY W283  
PAUL PAUL COLLEGE 101; HHS HEWITT 217; CONTINUING ED HOOD 111

Reasons for this request continued