



Student Name _____ (please print)

Term and Year _____

Student ID _____

DOB (mm/dd/yy) _____

PETITION FOR ACADEMIC RENEWAL

Address _____ City _____ State _____ Zip _____

Phone number _____ Email Address _____

***All correspondence regarding the outcome of your petition will be sent to your email address.**

I have read the procedures on the reverse side of this form and meet the required criteria. I hereby request that the following course(s) be alleviated from my academic records:

Semester/Year Taken	Course	Semester/Year Taken	Course
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

STUDENT'S STATEMENT OF CERTIFICATION: (check all that apply)

____ 1) The work to be disregarded is not reflective of my present level of performance

____ 2) Two years have elapsed from the time the coursework to be removed was taken

____ 3) Since the substandard coursework, I have completed (check one):

___ At least 24 units with a minimum GPA of 2.0 or

___ At least 18 units with a minimum GPA of 2.5 or

___ At least 12 units with a minimum GPA of 3.0

____ 4) I have attached a copy of my Taft College unofficial transcript

____ 5) I am relying on coursework from another college to satisfy Academic Renewal criteria?

What college(s)? _____

(It is the student's responsibility to see that current, official copies of all transcripts are on file in the Admissions and Records Office before filing for renewal.)

Student's Signature _____

Date _____

Verified by Counselor _____

OFFICE USE ONLY



Approved



Denied

Director of Admissions/Designee _____

Date _____

Changes made in Banner: _____

Student notified: _____