Petition for Exceptional Consideration
To a Music Department Standing Policy/Procedure

Please read the "Exceptional Consideration Policy and Procedures" (on the back) before filling out this form.

Current Date: ___________________________

Student Name: ___________________________  Student Signature: ____________________________

Student's Advocate: _______________________  Advocate Signature: ____________________________
(Must be a full-time faculty member)

The following information must be supplied. Attach additional page if needed.

Exception Requested:

Rationale:

EXCEPTIONAL Circumstances to be Considered:

Attach additional documentation to be considered (if any).

Department Chair Signature: ___________________________  Date: ____________________________

List Additional Parties Contacted:
1) ___________________________________________  Date: ____________________________
2) ___________________________________________  Date: ____________________________
3) ___________________________________________  Date: ____________________________
Advisor: ______________________________________  Date: ____________________________

Department Chair Comments:

Exception Granted: YES ________  NO ________

Copy to: 1) each person whose name appears on this form, 2) Student Permanent File  (12/2010 rev.)