

**Appeal for Reconsideration of Acceptance of Transfer credit**

Students who have earned 15 or more credits from UNLV may petition for reconsideration of acceptance of transfer credit. The petition must be submitted with the recommendation of your adviser, department chair, and dean directly to the Faculty Senate Office for consideration by the Admissions Committee with copies of course description and transcripts. In addition, recommendation from the UNLV department offering the compatible course is required.

**Appeal of Departmental/College Requirements**

Petitions for waiver of departmental or college requirements must be submitted with recommendation of your adviser, department chair, and dean directly to the Faculty Senate Office for consideration.

**Appeal of All-University Requirements**

Petitions for waiver of university requirements (except General Education Requirements) must be submitted with recommendation of your adviser, department chair, and dean directly to the Faculty Senate Office for consideration by the Academic Standards Committee with copies of supporting documents (e.g. course description, transcripts).

**Appeal of General Education Requirements**

Petitions for waiver of the general education requirements must be submitted with recommendation of your adviser, department chair, and dean directly to the Faculty Senate Office for consideration by the General Education Committee with copies of course description and transcripts.

**ALL PETITIONS CHECKLIST**

- Complete form on following page
- Attach copies of all supporting documentation
- Obtain required signatures (e.g. adviser, department chair, and dean)
- Bring the completed petition packet to the Faculty Senate Office (FDH 220)

4505 S. Maryland Parkway  
Box 455014  
Las Vegas, NV 89154-5014  
Phone: (702) 895-3689  
Fax: (702) 895-3609  
<http://facultysenate.unlv.edu>



# Petition Form

Name \_\_\_\_\_ NSHE# \_\_\_\_\_ L# \_\_\_\_\_  
Last First Middle

Address \_\_\_\_\_  
Number Street City State Zip Code

Email \_\_\_\_\_ Phone# \_\_\_\_\_

College \_\_\_\_\_ Major \_\_\_\_\_

First UNLV enrollment: Sem \_\_\_\_\_ Yr \_\_\_\_\_ Current GPA \_\_\_\_\_ Date of Graduation \_\_\_\_\_ Catalogue Year \_\_\_\_\_

Total hrs. completed \_\_\_\_\_ Sem. hrs in progress \_\_\_\_\_ Are you requesting credit overload?  Yes  No

If yes, check semester for which you are requesting the overload: 20\_\_  Fall  Spring Summer Session 20\_\_  1st  2nd  3rd

Requested Action:  Add/Drop  Grade Change  Withdrawal  Other

Justification:

I hereby authorize the Registrar's Office to release my

Academic records to the appropriate faculty committee.

\_\_\_\_\_  
Student Signature Date

	Signatures	Verifying Action Taken	Approved	Disapproved	Date
Advisor	_____	_____	_____	_____	_____
Chair	_____	_____	_____	_____	_____
Dean	_____	_____	_____	_____	_____
Instructor	_____	_____	_____	_____	_____

Comments:

### Action Taken by Committee

Chair: Academic Standards \_\_\_\_\_ Admissions \_\_\_\_\_ Gen. Ed. \_\_\_\_\_ Other Comm. or Council \_\_\_\_\_

Approved \_\_\_\_\_ Disapproved \_\_\_\_\_ Date \_\_\_\_\_

Comments: