

## GENERAL PETITION

- |   |   |
|---|---|
| A. Transfer of Course Credit (to Masters) | D. Acceptance of Grades below "B" toward Final Degree requirements. |
| B. Waiver of Required Course (for PhD)    | E. Other  |
| C. Substitution of Equivalent Course      |   |

### STUDENT

Please complete and obtain all signatures up until the Grad Division Section. It is the student's responsibility to provide any documentation to support their request (transcripts, syllabus, memos, etc.). Submit the form to Graduate Services (gradservices@ucmerced.edu) to obtain the Graduate Dean's approval.

Student Name: \_\_\_\_\_  
Last First Student ID Number

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Current School:  School of Engineering     School of Natural Science     School of Social Sciences, Humanities & Arts

Degree:  MA     MS     PhD

Effective date:  Fall     Spring    Year: \_\_\_\_\_ Graduate Program: \_\_\_\_\_

### I request to:

**A.** Transfer \_\_\_\_\_ units from \_\_\_\_\_ to a Master's degree taken prior to  
# of Units Name of Institution

First enrolling in the graduate program at UCM (**must attach official transcript**).

*(Note: A letter from the institution is required stating course work you would like to transfer was not used towards the bachelor degree if units were earned during undergraduate study.)*

Reason: \_\_\_\_\_

**B.** Waive \_\_\_\_\_ ( \_\_\_\_\_ ) from PhD requirements based on \_\_\_\_\_ ( \_\_\_\_\_ ) completed in a  
Unit(s) Course Number Unit(s) Course Number

MS/MA/PhD program at \_\_\_\_\_ (**must attach official transcript**).

Reason: \_\_\_\_\_

**C.** Substitute \_\_\_\_\_ ( \_\_\_\_\_ ) for \_\_\_\_\_  
UCM Course Number Unit(s) UCM Course Number Units

Reason: \_\_\_\_\_

**D.** Have \_\_\_\_\_ in \_\_\_\_\_ completed during \_\_\_\_\_ accepted towards final degree requirements.  
Letter Grade UCM Course Number Semester/Year (e.g., Fall/2004)

Reason: \_\_\_\_\_

**E.** Petition the following: \_\_\_\_\_

Reason: \_\_\_\_\_

STUDENT SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

**SCHOOL**

It is the student's responsibility to obtain the Graduate Advisor and Graduate Group Chair approval before submitting the form to Graduate Services. Additional comments from the program or student may be left below.

APPROVED     NOT APPROVED

\_\_\_\_\_  
Graduate Advisor (print) (signature) Date

APPROVED    NOT APPROVED

\_\_\_\_\_  
Graduate Group Chair (print) (signature) Date

Comments:

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**GRADUATE DIVISION**

APPROVED     NOT APPROVED

\_\_\_\_\_  
Dean of Graduate Division (print) (signature) Date