

UNIVERSITY OF LA VERNE COLLEGE OF LAW  
GENERAL PETITION FORM

1. Name (please print) \_\_\_\_\_ 2. Student ID No. \_\_\_\_\_

3. La Verne Email Address \_\_\_\_\_ 4. Telephone No. \_\_\_\_\_

5. Entrance Date \_\_\_\_\_ 6. (Circle one) Full-time Part-time 7. (Circle one) Day Eve

8. Current No. of Units \_\_\_\_\_ 9. No. of Hours Employed per Week \_\_\_\_\_

10. If the petition is granted, will No. 8 and/or No. 9 change? (Circle one) Yes No  
If yes, please explain:

11. REQUEST (use back if needed):

12. REASON(S) FOR REQUEST (use back if needed):

13. Student's Signature \_\_\_\_\_ Date \_\_\_\_\_

-----DO NOT WRITE BELOW THIS LINE-----  
Referred to: ( ) Dean ( ) Associate Dean of Academic Affairs ( ) Other \_\_\_\_\_

Action Taken: ( ) Granted ( ) Denied ( ) Other

Signature: \_\_\_\_\_ Date \_\_\_\_\_

Comments: