

**University of Denver, Sturm College of Law  
PETITION**

Information to be completed by student

NAME: \_\_\_\_\_ STUDENT ID #: 87\_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_ EMAIL ADDRESS: \_\_\_\_\_

PETITION FOR: \_\_\_\_\_ Drop Course(s) (WP) \_\_\_\_\_ Add Course (s) \_\_\_\_\_ Credit Overload  
\_\_\_\_\_ Register Late \_\_\_\_\_ Other (Explain) \_\_\_\_\_

Year in Law School \_\_\_\_\_ Semester \_\_\_\_\_ Division \_\_\_\_\_ Day \_\_\_\_\_ Evening \_\_\_\_\_ Hours Employed per Week \_\_\_\_\_

REASON FOR REQUEST:

Good cause must be shown. Attach additional pages and supporting documents as necessary to show good cause. Please list current schedule!

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

PETITION: **APPROVED** \_\_\_\_\_ **DISAPPROVED** \_\_\_\_\_

\_\_\_\_\_  
Associate Dean for Academic Affairs

\_\_\_\_\_  
Date

COMMENTS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_