**Petition to Extend the 12-Credit Limit for**

**Graduate Study**

**Student Name­:**

**G Number: \_\_\_\_\_\_\_\_\_\_\_\_\_**

**Graduate Program: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

If you completed more than 12 credit hours as a non-degree seeking student and wish to include those credit hours in your graduate program, please complete this form and submit to your Graduate Program Director.

* Meet with your advisor to update your planned program of study. Submit a copy of the revised planned program with this petition.
* Record below the courses taken prior to admission to a graduate program:

|  |  |  |
| --- | --- | --- |
| **Course Number** | **Course Name** | **Semester completed** |
|  |  |  |
|  |  |  |
|  |  |  |
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|  |  |  |
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Do you wish to include all of the above courses in your planned program? If not, please list the courses not included in your planned program: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* Record below the courses completed after admission to a graduate program:

|  |  |  |
| --- | --- | --- |
| **Course Number** | **Course Name** | **Semester completed** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

* Record below the courses that you still need to complete:

|  |  |  |
| --- | --- | --- |
| **Course Number** | **Course Name** | **Anticipated semester of completion** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  | **MORE** |

* Write a letter that addresses why you completed more than 12 credits as a non-degree seeking student.
* Obtain a letter of support from your advisor or Graduate Program Director to include credit hours over the 12-credit limit earned prior to admission to a graduate program.

Return this form and ALL required materials to your Graduate Program Director. The petition will not be considered until all required documentation is submitted.

**Student**

Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email Address (*please print clearly*):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Daytime Telephone Number:\_\_\_\_\_­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The semester/year you anticipate completing the program: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Program Advisor**

Name Signature Date

**Graduate Program Director (if different)**

Name Signature Date

*\*Students in the College of Education, please submit to the Director of the Student Information & Services Center at 401C DeVos Center before sending to The Graduate School.*

**Once approved by the Program Advisor and/or Graduate Program Director, please submit completed forms to:**

The Graduate School, 318C DEV

Contact Name: Jennifer Palm

Phone: (616) 331-6858

Email: [palmj@gvsu.edu](mailto:palmj@gvsu.edu)

*Updated 1-11-16 JRP*