

General Petition

Please complete this form in its entirety.

State your request and whatever reasons might justify its being granted.

A response will be sent to your GCTS box or GCTS email address as soon as possible.

Name	GCTS ID #	Date	GCTS Box #
Degree(s)	Telephone	GCTS Email Address (All educational information can only be sent to GCTS email addresses)	

State your request and whatever reasons might justify its being granted. If you need more room, use the back of this form or attach a separate sheet. A response will be sent to your GCTS box or GCTS email address as soon as possible.

Student Signature (REQUIRED)

*PLEASE NOTE: When a petition relates to the fulfillment of course or curricular requirements, the course instructor must also sign it. Comments may also be included. Without this endorsement, the Registrar will not be able to consider your petition.

The following action has been taken on your petition:

Registration Official Signature

Date