PETITION FOR General Education (GE) COURSE SUBSTITUTION

The purpose of this form is to allow students to petition for GE credit for a course that was taken at another institution (not courses taught at SSU). Transfer students and students having studied abroad may use it. Petitions, with all appropriate signatures and support materials, must be submitted before November 1st (for May graduation) and April 1st (for December graduation) prior to a student’s final semester. Petitions are considered on the basis of merit, not merely to expedite graduation.

INSTRUCTIONS:
Complete Sections I, II, and III and submit this form to Admissions & Records. A&R will contact you by phone or your sonoma.edu e-mail when Section IV done and the form is ready for pick-up. Complete Section V (with signature), then turn the petition in to the Office of Academic Programs, Stevenson 1041 for evaluation by the GE Chair.

SECTION I
1. _______________________  ______________  _________________
   Student Name    SSU ID Number   Telephone No.
2. Major ____________________  Minor ____________________
3. Have you filed for graduation? □ Yes □ No  Expected graduation date: ______________
4. I request to substitute: __________________________________________________
   Course No., Title, Units
   Taken at _____________________________________________________________
   College/University   Semester/Quarter/Year
5. For the following Sonoma State GE course: ____________________________
   In GE Area (circle):  A  B  C (transfer students: Arts, Humanities) D E ) / Category ( 1, 2, 3, 4, 5 )
   Note: If there is not an equivalent course, but the course meets the sub-area learning objectives (see http://www.sonoma.edu/senate/committees/ge/LGOs_new.html), please indicate “no specific course found” and circle the relevant subarea above.
6. I ask that it also meet the following requirement(s): (check if appropriate)
   □ US History □ US Government □ CA Government □ Ethnic Studies □ Lab □ Upper Division
   Note: An upper division petition will not be granted if the course was taken prior to a student’s junior standing year (60 semester units).
7. __________________________  _____________
   Student Signature    Date

SECTION II
Please attach the following (Petitions will not be considered without these documents.)
   □ Catalogue description and syllabus from course you wish to use as a substitution

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SECTION III
In consultation with your advisor, explain why this substitution is appropriate (If more space is needed, please staple typed explanation to this form).

___________________________________________________________________
___________________________________________________________________
___________________________________________________________________
___________________________________________________________________

___________________________________________________________________

Advisor Name (print)                Advisor Signature                Date

SECTION IV
Admissions and Records comments (does not constitute approval or denial):

___________________________________________________________________
___________________________________________________________________
___________________________________________________________________
___________________________________________________________________

Completed by (initials):  date:  

SECTION V
Comments by Chair of the Academic Department of the proposed SSU course listed in Section I.5, or department with the most similar course (if “no specific course found” is indicated).

___________________________________________________________________
___________________________________________________________________
___________________________________________________________________

Dept. Chair recommendation:  Approve  Deny

___________________________________________________________________

Dept. Chair Name (print)                Dept. Chair Signature                Date

SECTION VI
Comments by GE Chair

___________________________________________________________________
___________________________________________________________________
___________________________________________________________________

GE Chair recommendation:  Approve  Deny

___________________________________________________________________

GE Chair Name (print)                GE Chair Signature                Date

SECTION VII
Admissions and Records action:

___________________________________________________________________

Designator Posted By                Date

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