

847.866.3905 | registrar@garrett.edu | 2121 Sheridan Road | Evanston, Illinois 60201 | 800.SEMINARY | www.garrett.edu

Part I: Student Information

Please complete the requested student information below.

Name: _____ ID #: _____
Term & Year: _____ Degree Program: _____

Part II: Reason for Petition Request

Please complete the requested petition information below.

Briefly state the reason for the petition request:

Identify supporting documentation (if any):

When you have completed the necessary sections listed above, submit this form to student.support@garrett.edu for review and final decision. As a reminder, it is often helpful to submit supporting documentation along with the petition request form (ie; doctor's note, military documentation etc). You will receive an initial confirmation when your petition request is received and a final confirmation when a final decision is reached, which may take up to two weeks. To review additional information regarding any policies related to your petition request, access [Academic Handbook 2024-2025](#).

Office Use Only (as needed):**Support (Approve)****Do Not Support (Not Approve)****Advisor Name:**☐☐**Instructor Name:**☐☐**Degree Director Name:**☐☐**Other Office Name:**☐☐**Academic Affairs Name:**☐☐