

Georgia Southern University
Petition for Academic Exception

Student Name: _____

Eagle I.D. _____

Major/Emphasis: _____

Phone No. _____

Purpose of Petition: Select one of the options below.

 Name of College/University

 Location of College/University

Transferred course – substitution of a transferred course for a GaSoU course

Transfer Institution

GaSoU Equivalent

Course Prefix	Course No.	Title	Grade	Hrs.	*E/S	Course Prefix	Course No.	Title	Hrs.

*E = Equates (viewable via web for all students)

*S = One time Substitution.

GaSoU course –substitution of a GaSoU course for another GaSoU course.

GaSou Course

GaSoU Course

Course Prefix	Course No.	Title	Grade	Hrs.	*S	Course Prefix	Course No.	Title	Hrs.

Exceptions to a GaSoU course(s).

Student Signature

Date

Advisor Signature

Attach documentation (course descriptions, course syllabus, etc.) to support your request.

The above substitution/exception is: Approved

Denied

Department Chair (responsible for course)

Department

Date

The above substitution/exception is: Approved
 Basis for decision:

Denied

Authorized signature

Department

Date

Copy of completed form should be sent to:

- Academic Department: P.O. Box _____
- College Advisement Center: P. O. Box _____
- Registrar's Office: P.O. Box 8092
- Other: _____