

# CALIFORNIA STATE UNIVERSITY, SAN BERNARDINO POSTBACCALAUREATE/ GRADUATE PETITION FOR WAIVER OF UNIVERSITY REGULATIONS

**Please read these instructions carefully before completing the form**

This petition may be used to waive the following university regulations:

## **12 Quarter Unit/9 Semester Unit Limit Prior to Classification**

In accordance with University regulations, no more than 12 quarter units (9 semester units) of credit earned in unclassified or conditionally classified standing may be used to demonstrate fitness to complete the program OR may be counted toward meeting the requirements for a graduate degree.

However, if you feel extenuating circumstances have precluded your classification in a more timely manner, you may petition the Dean of Graduate Studies to waive this requirement on your behalf.

In order for the Dean to evaluate your situation you must include in your request not only a complete statement of your situation, but also a statement of why it is critical for this requirement to be waived. Additional pages may be attached.

## **Seven Year Limit on Applicable Course Work**

The postbaccalaureate program you are pursuing must be completed within a seven year period (for some programs on this campus there –may be earlier completion requirements). No more than seven years may elapse between the time of registration for the earliest course listed on your program and the completion of all requirements for the degree. The maximum age limit for a course is twelve years since the course was first taken and only 2/3 of a program can be recertified. If you have course work that has surpassed the seven year limit, you may petition the Dean of Graduate Studies to waive this regulation.

In order for your petition to be approved you must have a written statement from a faculty member stating **I HAVE EXAMINED THIS STUDENT AND FOUND THEM TO BE CURRENT IN THE SUBJECT MATTER OF (name of the course or courses being waived).**

## **Extension of Time to Complete an Incomplete Grade**

An incomplete grade must be made up within the calendar year immediately following the end of the term in which it was assigned (or as indicated by the instructor of the course). If it is necessary to extend this time limit, the student must obtain the consent of the instructor.

## **Retroactive Withdrawal (Students must withdraw from all classes in the term)**

Requests for withdrawal following the close of the term will be considered only for: accident or illness (physical or mental), serious personal or family problems, or military transfer.

Documentation is required. In addition, extenuating circumstances must be shown to have prevented withdrawal in a more timely fashion. The student must list each course number and obtain the instructor's signature for all courses they are attempting to withdraw from. Partial withdrawal of grades during a term is not permissible. All courses must be withdrawn and will be noted with a "W" on the official transcript. Lack of awareness of the withdrawal procedures is not an extenuating circumstance.

Employment-related reasons are acceptable only for withdrawals processed during the term in question. This withdrawal would be completed a "Drop After the Census Date" request.

### **Instructions for Completing the Waiver:**

1. Complete and sign the attached Waiver of University Regulations form.
2. Attach any supporting documentation required for your request.
3. Submit the form as needed for signatures. If instructor's signatures are required, they must be obtained before this form is given to the graduate coordinator for their signature. The petition will not be reviewed without the graduate coordinator's signature).
4. Your graduate coordinator should then send the form to Graduate Studies ([gradstud@csusb.edu](mailto:gradstud@csusb.edu)) for review.
5. Once your request has been reviewed, you will receive an email and copy of the form via Adobe Sign. You may download the form for your records. If approved, the form will automatically be sent to the Office of the Registrar for final processing.

**California State University, San Bernardino (CSUSB)  
Postbaccalaureate/Graduate Petition for Waiver of University Regulations**

Name \_\_\_\_\_ Date \_\_\_\_\_  
Street Address \_\_\_\_\_ Telephone \_\_\_\_\_  
City, State, Zip \_\_\_\_\_ Coyote ID# \_\_\_\_\_  
Campus Email \_\_\_\_\_

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I am enrolled in the following degree: \_\_\_\_\_

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I hereby petition for waiver of the following University regulation:

\_\_\_\_\_ a. Waiver of the Graduate Writing Assessment Requirement. **Attach Document Required.**

\_\_\_\_\_ b. Waiver of the unit limit prior to classification (12 quarter units/9 semester units).

\_\_\_\_\_ c. Waiver of the 7 year limit on applicable coursework.

\_\_\_\_\_ Requires certification of currency by faculty member\* (check the box to certify). List all courses to be waived:

*\*I have examined this student and found them to be current in the subject matter of (name of the course or courses being waived)*

\_\_\_\_\_ d. Extension of time to complete an incomplete course.

Course number and title: \_\_\_\_\_ Incomplete received: Term: \_\_\_\_\_ Yr: \_\_\_\_\_

Instructor Signature \_\_\_\_\_ Extended to: Term: \_\_\_\_\_ Year: \_\_\_\_\_

\_\_\_\_\_ e. Retroactive Withdrawal for Term: \_\_\_\_\_ Year: \_\_\_\_\_ **Attach Document Required.**

List Courses: _____	_____	_____
	Instructor's Signature	Instructor's Signature
_____	_____	_____
	Instructor's Signature	Instructor's Signature
_____	_____	_____
	Instructor's Signature	

\_\_\_\_\_ f. Other: \_\_\_\_\_

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**Student's Statement.** (Indicate why you feel this petition should be granted. Attach additional page if necessary.)

I certify that I have read the attached information sheet pertaining to the waiver of University regulations that I am requesting, have attached all pertinent information and required documentation to support my request, and have obtained all necessary signatures of certification.

\_\_\_\_\_  
**Student's Signature**

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**Program Certification (\*Confirm certification by checking the box next to "C" above)**

\_\_\_\_\_  
**Graduate Program Coordinator's Signature**

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\_\_\_\_\_  
**Dean of Graduate Studies Signature**

\_\_\_\_\_  
**Date**