

University of Kansas - Office of University Governance

REQUEST TO FACULTY EXECUTIVE COMMITTEE FOR EXCEPTION TO UNIVERSITY-WIDE ACADEMIC POLICY

UNIVERSITY SENATE RULES, ARTICLE II. Section 9. Exceptions to University Wide Academic Policies provides"

*"Under exceptional circumstances, a student **or, if a physical or mental incapacity prevents the student from filing his or her own appeal, another individual** may petition for an exception to a University-wide academic policy. The petitioner must first contact the chair of the department or program involved. If the department Chair believes there may be exceptional circumstances, the petition shall be forwarded with a recommendation to the Dean of the College or School. If the Dean (or his/her designee) believes there may be exceptional circumstances, the petition shall be forwarded with a recommendation to the chair of the Faculty Senate Executive committee (FacEx). For purposes of this provision, lack of knowledge of the appropriate policy is not an exceptional circumstance. The decision of FacEx in regard to the petition request is final. "*

Student Name: _____ KUID: _____
Print Name (7 -digit)

E-Mail: _____ Please notify me by E-mail when my petition results are available.

Course(s), Number(s) and Name(s)

Fall Spring Year - 20__

To Student:

Specify the particular university-wide academic policy from which an exception is sought. (Complete University Senate (USRR) and Faculty Senate (FSRR) Rules and Regulations are at www.ku.edu/~govern/)

____ Withdrawal (USRR 2.2.5 and USRR 2.3.3) ____ Add (FSRR 5.4.1) ____ CR/NC (USRR 2.2.8)

____ Course Repeat (USRR 2.2.9) ____ Academic Forgiveness (USRR 2.8)

____ Requirements for Graduation (USRR 3.1.1) _____ Other

Describe the "exceptional circumstances" that may warrant an exception to the policy (attach Documentation or a continuation page, as necessary. Text *must be legible*):

Student's Signature: _____

Date _____

To Department: If the department chooses not to endorse this request, please inform the student. If the department endorses the request, please provide the department's recommendation and the reason for it, and forward to the School/College's designated administrator. (*Attach documentation or a continuation page, as necessary*)

Departmental Signature _____ Title _____ Date _____
Printed Name _____ Email _____

To College or School: If the School/College does not endorse the student's request, there is no basis for a request to FacEx. Please inform the department and student. If the School/College endorses the request, please provide the College/School's recommendation and the reason for it and forward this form and any documentation to the FacEx Review Committee, c/o University Governance, 33 Strong, phone 864-5169).

School Signature _____ Title _____ Date _____
Printed Name _____ Email _____

Action by FacEx Review Committee: Approved <input type="checkbox"/> Denied <input type="checkbox"/> Date _____
