

# Graduate Petition

Please carefully read ALL sections of the form. Incomplete petitions WILL NOT be reviewed.

---

The **Graduate Council Petitions Committee** is responsible for acting on petitions from individual students for exceptions in university-wide graduate policies and regulations. The student should petition only after all remedies have been exhausted in the appropriate school or college. Students should meet with their Advisor **BEFORE** submitting this form.

---

## INSTRUCTIONS FOR PREPARING AND FILING PETITIONS

Student petitioners must provide the following information in this Graduate Petition Form. Incomplete petitions will not reach the Graduate Council Petitions Committee for consideration.

All forms must be typed:

- Student Information
- Type of Petition to include Graduate Catalog language and/or University policy from applicable catalog year.
- Justification
- Required Attachments:
  - a) Wingspan Transcript
  - b) Statements from the student's Academic Advisor, Department Chair, **and** either the Graduate Director **or** College Dean.

## DEADLINES

The **completed Graduate Petition Form**, with signatures, is due to The Graduate School, 211 Tillman Hall or [gradschool@winthrop.edu](mailto:gradschool@winthrop.edu), no later than two weeks prior to the next Graduate Council meeting date. The Graduate Council meeting dates are set forth in advance of the academic year at <https://www.winthrop.edu/graduateschool/graduate-council-and-graduate-faculty-assembly-meetings.aspx>.

---

## Student Information (please print):

- Name \_\_\_\_\_
- Winthrop ID number \_\_\_\_\_
- Telephone number \_\_\_\_\_
- Winthrop email \_\_\_\_\_
- Expected graduation date \_\_\_\_\_
- Catalog year \_\_\_\_\_

**College:**

- College of Arts and Sciences
  - College of Business Administration
  - College of Education
  - College of Visual and Performing Arts
- 

**Degree Program:**

Degree, Major, Concentration (if applicable)

---

**Advisor's Name:**

---

**TYPE OF PETITION**

**I petition the following exception to usual rules, regulations, or policies of Winthrop University (check all that apply):**

- Extension of 6 year time-limit
  - Counting out-of-date transfer courses (Approval to Transfer Graduate Credit form required)
  - Taking increased hours while on probationary status
  - Readmission after dismissal
  - Other (Please explain in detail) \_\_\_\_\_
- 

**University Rules/Regulations Relevant to Petition:** Please reference the University Rule and/or Regulation for which you are petitioning an exception. Locate the relevant rule and/or regulation in your applicable Graduate Catalog and attach.

---

**Justification:** Please attach a concise justification as to why your petition should be approved by the Graduate Council Petitions Committee. Keep in mind that the audience reviewing the justification may be unfamiliar with this particular graduate program and with your particular situation. This statement should be well written and provide clear, robust, and compelling justification for your petition. Please be advised that unsupported statements will not be considered. Please explain any acronyms relevant to this specific program.

---

**Required Attachments:**

- a) Please attach a copy of your unofficial transcript (accessible via Student Records in Wingspan) or Degree Audit (accessible via DegreeWorks in Wingspan).
  - b) Using the attached Petition Circulation form, the petitioner must also attach statements from each of the following: Academic Advisor, Department Chair, **and** either the Graduate Director **OR** College Dean. Each individual's contact information must be included. Such statements should include justification explaining their position on the petition, explicitly indicate whether they support or do not support the petition, and sign/date the statements.
- 

**Optional Attachments:** Provide any additional relevant documentation in support of the petition: i.e. transcripts (for courses taken outside of Winthrop), approval to transfer graduate credit form, syllabi of courses related to the petition, letters of support documenting specific information related to the petition, documentation of extenuating circumstances, etc.

---

By signing below, I, the Petitioner, acknowledge that The Graduate School will forward my petition to the Graduate Council Petitions Committee for review and final decision. The student and advisor will be notified of the decision once it is made. Appeals of the decision of the committee may be made to the Dean of the Graduate School.

Petitioner Signature:

Date:

---

**Petition Circulation Form**

This form is to be completed by each of the following: Academic Advisor, Department Chair, and either the Graduate Director **OR** College Dean. Multiple copies of this form may be necessary depending on graduate program. Each individual's contact information must be included. Such statements should include justification explaining their position on the petition, explicitly indicate whether they support or do not support the petition, and sign/date the statements. All comments must be typed.

Does this petition require immediate review?

Yes  
If yes, please briefly explain why.

No

**This petition was reviewed by:**

Name (please print):

Position (highlight position below):

*(Academic Advisor, Department Chair, Graduate Program Director, or College Dean)*

Contact Info (phone and email address):

**Indicate which statement applies:**

- I support this petition.
- I do not support this petition.

**Justification:**

The audience reviewing the justification may be unfamiliar with this specific graduate program. Please provide any additional relevant details to assist in evaluating the petition and to clarify why you support or do not support the petition. Please explain any acronyms relevant to this specific program.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Petition Circulation Form**

This form is to be completed by each of the following: Academic Advisor, Department Chair, **and** Graduate Director **OR** College Dean. Multiple copies of this form may be necessary depending on graduate program. Each individual's contact information must be included. Such statements should include justification explaining their position on the petition, explicitly indicate whether they support or do not support the petition, and sign/date the statements. All comments must be typed.

Does this petition require immediate review?

Yes  
If yes, please briefly explain why.

No

**This petition was reviewed by:**

Name (please print):

Position (highlight position below):

*(Academic Advisor, Department Chair, Graduate Program Director, or College Dean)*

Contact Info (phone and email address):

**Indicate which statement applies:**

- I support this petition.
- I do not support this petition.

**Justification:**

The audience reviewing the justification may be unfamiliar with this specific graduate program. Please provide any additional relevant details to assist in evaluating the petition and to clarify why you support or do not support the petition. Please explain any acronyms relevant to this specific program.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Petition Circulation Form**

This form is to be completed by each of the following: Academic Advisor, Department Chair, **and** Graduate Director **OR** College Dean. Multiple copies of this form may be necessary depending on graduate program. Each individual's contact information must be included. Such statements should include justification explaining their position on the petition, explicitly indicate whether they support or do not support the petition, and sign/date the statements. All comments must be typed.

Does this petition require immediate review?

Yes  
If yes, please briefly explain why.

No

**This petition was reviewed by:**

Name (please print):

Position (highlight position below):

*(Academic Advisor, Department Chair, Graduate Program Director, or College Dean)*

Contact Info (phone and email address):

**Indicate which statement applies:**

- I support this petition.
- I do not support this petition.

**Justification:**

The audience reviewing the justification may be unfamiliar with this specific graduate program. Please provide any additional relevant details to assist in evaluating the petition and to clarify why you support or do not support the petition. Please explain any acronyms relevant to this specific program.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_