



TAYLOR UNIVERSITY FORT WAYNE

Registrar's Office

GENERAL ACADEMIC PETITION

Name _____ Box# _____ Date _____

Student # _____ Classification _____

Cum GPA _____ Major _____

Request:

Reason for Request:

Comments: For Advisor or Office Use Only

Advisor _____

Registrar _____

Action: Approved Denied

Vice President _____

Date _____



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