

2015-2016 MAXIMUM UNIT PETITION PROCESSING

Name _____ ID# _____

COMMUNICATIONS

Decision

- Approved by _____: Letter With Note Personal Comments
- Denied by _____: Letter Personal Comments
- Follow-Up to _____ (details in Comments) Letter

Comments:

COMPLIANCE

- D2 (attached): Waive _____ units M2: Post Max Ext @ _____

Notes: _____

BY: _____ DATE: _____

AWARDING

- Counselor _____ UGRD CRED GRAD
- Award/Revise: Fall _____ FT TT HT LT Units _____ Wt _____
 Spring _____ FT TT HT LT Units _____ Wt _____
- F02 Service Indicator for Part time: Fall _____ Spring _____
- FMAX (manual package/revision)

Notes: _____

