graduate studies | YORK UNIVERSITÉ UNIVERSITY

Office of the Dean
York University

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Retroactive/Manual Academic Petition Form

- Please carefully read the submission guidelines and refer to the deadlines in the Important Dates section before submitting your petition.
- Submit completed petition form, personal statement and relevant supporting documentation to your program office. Please allow 4 to 6 weeks after the petition has reached FGS for processing.
- Contact your Graduate Program Assistant with any questions on the petitions process or your petition in particular.
- Normally, a petition will not be processed if a student is not in good academic and/or financial standing.
- Incomplete petitions will be returned to the student and their graduate program. Updated information may then be provided within ten (10) days from the date indicated on the petition, or the petition will be cancelled.
- Making falsestatements on thisform,personal statement and/or supporting documents is abreach of theSenate Policy on Academic Honesty.

Please Note: Signatures must be collected over email, either through a digital signature on the PDF form or an accompanying email attachment stating "I have read and approved this submission"

Applicant Information

Surname	Given name(s)	Preferred name(s)

Student number	E-mail

Program	Degree & Level of Study	Registration Status
- please select -	- please select -	- please select -

Petition Type

Leave of Absence
- ☐ General
- ☐ Family Care
- ☐ No Course Available

Number of terms requested _____

Effective term and year:
FA _____ WI _____ SU _____

General Petitions
- ☐ Reinstatement to Complete

Effective term and year:
FA _____ WI _____ SU _____

Extension of Program Time Limits*
- ☐ CUPE 3093
- ☐ Non CUPE 3903

**All petitions for extensions will be assumed to be for part-time status unless otherwise specified.*

- ☐ Other Petition:

FGS Use Only

LOA _____ Terms _____ Blanks _____ C/F _____ STAC _____

Privacy: Personal information in connection with this form is collected under the authority of *The York University Act*, 1965 and will be used for educational, administrative and statistical purposes. If you have any questions about the collection, use and disclosure of personal information by York University, please contact: Faculty of Graduate Studies, 230 York Lanes, (416)736-2100 x 55521.

Checklist

- ☐ **Personal statement**— Attach a short statement stating the petition request (required).
- ☐ **Supporting Documentation**— Attach all relevant documentation. Refer to Academic Petition Guidelines for assistance.

I certify that the information I have provided in this academic petition form, personal statement and relevant supporting documentation is true, complete and accurate. I understand that any falsification of submitted documentation is a breach of the Senate Policy on Academic Honesty.
From time to time the Faculty of Graduate Studies will conduct audits even after a decision has been made. If it is found, after an audit is made, that you were ineligible for the request, a favorable decision can be reversed.

Student Name	
Signature	Date (mm/dd/yyyy)

Graduate Program Direcor Recommendation and Rationale

- ☐ Recommended
- ☐ Recommended with Conditions
- ☐ Not Recommended

Rationale

Please provide a rationale for your recommendation (required). Attach supporting documents, if required.

Graduate Program Director name	Signature	Date (mm/dd/yyyy)

Faculty of Graduate Studies Petitions Decision

☐ Granted ☐ Partially Granted/Granted with Conditions ☐ Refused

Fall 20____ Winter 20____ Summer 20____

Approved by:	Signature	Date (mm/dd/yyyy)

Registrar's Office Use Only

Year Level	Fee Assessment	Processed by	Date processed (mm/dd/yyyy)