Please bear down with ball-point.
You are making multiple copies.

PLYMOUTH STATE UNIVERSITY
Student Request

Print name ____________________________
HUB suite ____________________________ Local phone ________________
Home address _________________________
Degree/Major/Option __________________
Academic Minor _______________________

☐ 1st ☐ So ☐ Jr ☐ Sr
Catalog year used for major ___________
Catalog year used for minor ___________
Catalog year used for General Education ___________

If your request refers to particular courses, please identify:

<table>
<thead>
<tr>
<th>Course ID</th>
<th>Course Title</th>
<th>Instructor</th>
<th>Term/Year</th>
</tr>
</thead>
<tbody>
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</tbody>
</table>

Request: __________________________________________________________

Rationale—requests will not be considered without your rationale:

__________________________________________________________________

__________________________________________________________________

__________________________________________________________________

Student’s signature ____________________________ Date __________

Please obtain signatures as indicated and then submit to the Undergraduate Studies Office for action:

☐ Advisor ____________________________ Date ______
   Recommended ☐
   Not Recommended ☐

Comments: ____________________________

☐ Instructor ____________________________ Date ______
   Recommended ☐
   Not Recommended ☐

Comments: ____________________________

☐ Chair/Designee ________________________ Date ______
   Recommended ☐
   Not Recommended ☐

Comments: ____________________________

☐ Associate Vice President/Director ______ Date ______
   Approved ☐
   Not Approved ☐

Comments: ____________________________

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