

# MSOM Petition for Overriding the Maximum Units

Name: \_\_\_\_\_ Student I.D.: \_\_\_\_\_

Quarter/Year: \_\_\_\_\_ Date Submitted: \_\_\_\_\_

Reason for taking over 24 units:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Classes petitioned for the specified quarter

No.	Course #/Course Name	Units
1		
2		
3		

Total Units Petitioned:

Units Allowed: 24

Units to Override:

Current GPA: \_\_\_\_\_

**Granted**

**Denied**

Program Director	Academic Dean

Registrar registered over 24 units on MM \_\_\_\_\_ /DD \_\_\_\_\_ /YY \_\_\_\_\_