

## **Petition to Register for Underload**

Class Voor					UID:			
Class Tear:	ass Year: Option:				isor Name:			
Caltech Email:	Caltech Email:				Cell Phone:			
Pronouns (optional	Pronouns (optional):				Petition is for (term/year):/			
<ul><li>3. If you plan to sub</li><li>4. Freshmen, Sophothan 27 units not</li><li>5. Seniors: Submit to</li></ul>	e <u>UASH Har</u> provided on bmit medica pmores, Juni submitted b this to the R	this forr il docum iors: sub by Add I egistrar'	n is <u>PRIVATE</u> entation, pleas mit this to the U Day may result s Office by Dre	and will only use the Property of the University	ly be shared ovider Repo ate Deans On ineligibility	with those who have a neart Form.  Fice by Add Day. Underlo		
1. List the course(	(s) you inte	nd to tal	•	hree terms:				
This term Course Number   Sec. # Units			Next term		T = 1.	The next term	TT *.	
Course Number	Sec. #	Units	Course Num	ber	Units	Course Number	Units	
- 1 T T 1			Total Units			Total Units		
Total Units						•		
	ou need an i	underloa	nd for this term	n. (Attach a	separate sh	eet of paper if necessary)	)	
2. Explain why yo	ou need an u				•	eet of paper if necessary)		
2. Explain why yo	□ Do not re	ecomme	nd		separate sh	eet of paper if necessary)	Da	
2. Explain why yo		ecomme	nd	Advisor	Signature	Signature (for seniors: Ro	Da	
2. Explain why yo	☐ Do not re☐ Deny this of four academic 133(c).	ecomments petition years, excessive average of	nd  pept as provided  40.5) per term)	Advisor  Dean/As  Athletic	Signature soc. Dean S	Signature (for seniors: Ro	Da egistrar) Da	