VASE PETITION FOR OUT OF SEQUENCE COURSE

FIRST NAME: ___________________________ LAST NAME: ___________________________

USC ID: ________________________________

USC E-MAIL: ____________________________

PHD OR MS: ______________ MAJOR: ______________________________

POST CODE: ______________

REQUEST TO COUNT _________________________ TAKEN OUT OF SEQUENCE  
COURSE NUMBER ____________________________ SEMESTER _______________
(Fall, Spring, Summer + Year)

FOR UNIT GRADE POINT CREDIT.

THIS COURSE WAS TAKEN AFTER _________________________ SEMESTER _______________
COURSE NUMBER ____________________________ (Fall, Spring, Summer + Year)

Please attach student statement and any other supporting documentation.

APPROVALS:

DEPARTMENT CHAIR (PRINT NAME) __________________ DEPARTMENT CHAIR SIGNATURE ____________ DATE ____________

DEAN (PRINT NAME) __________________ DEAN SIGNATURE ____________ DATE ____________

ENTERED IN SIS: ____________________________ DATE ____________ SIGNATURE ____________