

SAN DIEGO STATE UNIVERSITY
Division of Graduate Affairs
SSE 1410 (619) 594-5213
grad.sdsu.edu
gra@sdsu.edu

Petition for Adjustment of Academic Requirements for the Graduate Degree (PAAR)

(TYPE OR PRINT CLEARLY)

RED ID

Last Name

First

Degree (e.g., MA, MS, MBA) and Major (concentration/specialization if applicable)

Street Address

Apt/#

Phone

City

State

Zip Code

Email

STUDENT REQUEST

State request and provide explanation/reason for request. For example, if modifying your official Program of Study, indicate course substitution(s) requested, specify deadline extension for incomplete(s), list additional courses to replace expired courses, etc.

Student Signature

Date

GRADUATE PROGRAM

Specific request(s) from graduate program

Signature of Graduate Adviser

Date

DIVISION OF GRADUATE AFFAIRS

Approved

Denied

Comments

Graduate Dean/Designee Signature

Date