



Cornell University School of Continuing Education and Summer Sessions  
B20 Day Hall, Ithaca, NY 14853-2801 • 607.255.4987

## GENERAL PETITION & NOTIFICATION FORM

Cornell seven-digit ID number: \_\_\_\_\_  Spring 20\_\_\_\_  Summer 20\_\_\_\_  Fall 20\_\_\_\_  Winter 20\_\_\_\_

Cornell employee:  Yes  No

E-mail address: \_\_\_\_\_ Today's date: \_\_\_\_\_

Name: \_\_\_\_\_  
Last First Middle Suffix (Jr., III, etc.)

Local address: \_\_\_\_\_  
Street Apartment #

City State Zip Cell phone: \_\_\_\_\_  
Area code / Country code

I ask permission to: \_\_\_\_\_  
Drop, add, change credit hour or grade option, receive refund Specify course(s) affected

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**Please explain thoroughly the circumstances that made this petition necessary (attach letter if you prefer):**

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**Instructor statement (if applicable):**

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\_\_\_\_\_  
Instructor's signature Date Student's signature Date

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**Action taken:**

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\_\_\_\_\_  
Agent Date