

**Exemption of BCOM Policy Petition**

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| Your Information |
| Student Name: | Address: | Phone: | Email: |
| RequestCitation of the policy for which you are requesting an exemption. |
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| ReasonStatement of the extenuating circumstances or reason your request should be considered. Supporting documentation is required (see below). Instead of using the space provided below, you are welcome to attach a typed statement. |
|   |
| Supporting Documentation Please submit any information that supports this request.  |
| **List all supporting documents you are submitting:** |
|  |
| * I certify that, to the best of my knowledge, all information I have provided above is accurate and correct
* I understand that I am seeking an exception to a stated college-wide academic policy, procedure, and/or regulation.
* I understand that this is a request and does not guarantee BCOM will approve the exemption of policy request. The BCOM Office of Student Affairs will make a determination as to whether the exemption will be granted.
* I assert that my extenuating circumstance(s) are evident and can be substantiated.
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| Student Signature: | Date: |
| ***Return form to: Director of Student Affairs, Brett Newcomer Room 360*** |
| **Office of Student Affairs Action on Petition*** Approve
* Deny
 |
| Signature: | Date: |
| **Course Director Acknowledgement**  |
| Signature: | Date: |