CERRITOS COLLEGE

Student: ___________________________ Date: __________/________/_________

Date of Birth: __________

Print Name: LAS

Semester
- [ ] FALL
- [ ] SPRING
- [ ] SUMMER

Year: __________

Initial Registration [ ] Change of Program [ ]

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<tr>
<th>Circle one</th>
<th>Class Number</th>
<th>Course (Name &amp; No.)</th>
<th>Units</th>
<th>Time</th>
<th>Course Meets</th>
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Instructor:
1. Check the "Petition for Academic Records & Standards Committee" box, then
2. Sign on the line where it says "Instructor signature may be required."

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Student Signature

Staff use only
- [ ] Pre-Requisites - Student
- [ ] Clearance for units increase
- [x] Petition for Academic Records & Standards Committee

OR [ ] Enrolled in Pre-Re

Indicate Semester Enrolled: __________

Counselor signature

Units allowed

Sign here

Admission & Records-VG-12-07