## **Open Campus Program**

## **Petition to Exceed Unit Maximum**

This petition is required before enrollments are accepted for courses that will put students over the unit limitation (8 undergraduate units, 4 graduate or professional units or 5 combined) for the quarter. This petition must be received at UC Davis CPE by the end of the third week of the quarter; late submissions may result in late fees being charged.

Last name	First name	Middle initial
Street addressCity	State	Zip
Local phone	Social Security Nu	mber*
Email		
If you do not want to receive period programs in your area of interest, ple		nuing and Professional Education courses and
Please add <b>cpeinfo@ucdavis.edu</b> to properly.	your address book or safe list t	o ensure that our email messages are delivered
Are you a citizen or permanent resi	dent of the U.S.? $\square$ Yes $\square$ N	lo
If no, please provide Visa type:	Visa issued	by:
to the Internal Revenue Service pursuant to the	e reporting requirements imposed by th	your Social Security Number and other pertinent information e Taxpayer Relief Act of 1997. UC Davis Continuing and lisclosure is mandatory. This notification is provided to you as
I hereby request permission from the I units of Open C		d Professional Education to takequarter, 20
Course (list dept., course number,	course title)	Units
1. Reasons for taking courses (use a	dditional pages if necessary)	

2. Are you accumulating units t	oward a degree? 🔲 Yes 🔲 No		
If yes, what type of degree? $\Box$	Undergraduate 🚨 Graduate 📮 Oth	er:	
From what institution?			
3. How many units (approximate semester units and/or	tely) have you accumulated througho	ut your college career up to tl	his point?
4. What is your current grade p	oint average?		
5. What universities or colleges	have you attended? Please list them:		
Institution	Dat	es of Attendance	Deg
6. Are you planning to use units Yes ☐ No	earned through Open Campus Progra	am toward a degree at UC Dav	ris?
	from UC Davis, it is strongly recon confirm the transferability of Ope cation process.		
7. Have you been regularly enro	olled in fall, winter or spring quarter a	at UCD? ☐ Yes☐ No	
If yes, last quarter	and year enrolled.		
Have you completed your degre	e? ☐ Yes ☐ No		
	mic reasons, please attach a curren sor, showing planned and complete		with
8. Have you applied for admissi	on/readmission to UC Davis? 🖵 Yes 🖵	l No	
If yes, what is your intended ma	jor?		
9. Who advised you to enroll in	the Open Campus Program?		
10. How many quarters have yo	u attended the Open Campus/Concu	rrent Program?	
How many units did you compl	ete during each quarter?,,	·)	
Signature	Date		112 5
	phone of the status of this petition wi	thin three (3) working days af	
Return or mail to:	Office hours:	UCD Exc Ltr/Acad Pl	lan
UC Davis CPE	Monday thru Friday	Status	
Open Campus	8:30 a.m4:30 p.m. Phone: (530) 757-8880	Notified	
1333 Research Park Drive	Phone: (23th /2/ 888th		