Public Policy Program
Major/Minor Course Petition

Name: ____________________________ Date: ____________________________

SUID Number: ____________________________ Email: ____________________________

Expected Graduation Date: ____________________________

In order to submit a petition form, you must be a declared major or minor. Course petitions MUST be submitted by the end of the first week of the quarter in which you are enrolled; prior approval is required.

Please Complete

Choose one:

[ ] Regular Stanford Course  [ ] SIW Course  [ ] Directed Reading*  [ ] Oxford Tutorial*

[ ] Transfer Course (attach approval from Transfer Credit Office)

* Directed Reading and Oxford Tutorial petitions must include a 1-2 page project description and reading list. They should also include a method of evaluation (frequency of student-professor meetings, required written assignments, final project, grading option). The faculty supervisor must sign below. These course units may only be applied towards concentration course units.

Course Number and Title: ____________________________

Institution: ____________________________

Instructor Name and Affiliation: ____________________________

Quarter or Semester/Year: ____________________________ Units: ________ Grade (if completed): ________

How do you wish the course to be applied to your Public Policy major/minor? Please be specific. Make sure to review the University requirements in the Stanford Bulletin - Undergraduate Degrees and Program concerning double (multiple) majors and minors.

[ ] Preparatory Course    [ ] Core Course  [ ] Concentration Course in __________

[ ] Major Department: ____________________________ Substitue Course for: ____________________________

Please Attach

- A syllabus (which should include course description, texts used, hours/week)
- Coursework completed for the course
- A brief statement as to why this course should be counted (what you gained and how it will be applied to your major/minor)
- An unofficial transcript

Petition Approved?  Yes  No

Program Director Signature: ____________________________ Date: ____________________________