

Today's Date: _____

California Institute of Technology
Dean of Students Office 210-87

Petition to Register for Underload

Name: _____ Petition is effective for (term/year): _____ / _____

UID: _____ Year: _____ Option: _____

Caltech Email: _____ GPA (last term): _____

Other Email: _____ Mobile Phone: _____

Adviser's Name: _____ Adviser's Email: _____

IMPORTANT NOTES

- ◆ Your petition for an underload must be submitted by Add Day for the term.
- ◆ All information provided on this form is PRIVATE and will only be shared with those who have a need to know.
- ◆ Please read the Guidelines for Preparing and Submitting Underload Petitions, in the UASH Handbook §3 before writing and submitting this petition.

1. List the course(s) you intend to take in the next three terms:

| This term | | Next term | | The next term | |
|-------------|-------|-------------|-------|---------------|-------|
| Courses | Units | Courses | Units | Courses | Units |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| Total Units | | Total Units | | Total Units | |

2. Explain why you need an underload for this term. (Attach a separate sheet of paper if necessary.)

Recommend Do not recommend

Approve Deny this petition

Signature of Adviser Date

Signature of Dean/Associate Dean Date

International Student Programs signature/date
(INTERNATIONAL STUDENTS ONLY)

Associate Athletic Director signature/date
(STUDENTS PARTICIPATING IN NCAA SPORTS ONLY)