

University of Hawai'i at Manoa
Shidler College of Business
Office of Student Academic Services
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 Email: business@hawaii.edu

Undergraduate Program Petition

Pre- Business Students

Student: Please fill out sections I and II.

I. Name: _____
Last First

Student I.D.: _____ Class Standing: _____ Today's Date: _____

Intended Major: _____

Current/Local Address: _____
Street

_____ City State Zip Code

Telephone No.: _____ Email: _____

II. STATEMENT OF REQUEST: If you are petitioning for course equivalency, please attach a course syllabus that includes a detailed course description, the textbook(s) used, and the chapters covered to support your request.

Course No.: _____ Course Title: _____

Institution (Please spell out): _____

Semester/Quarter Taken: SPRING SUMMER FALL Year: _____

Petitioning for:

Course Equivalency to: _____

Concurrent Enrollment with: _____

..... OFFICE USE ONLY.....

III. Referred to: _____ Chairperson/Faculty/Dean

Department: ACC BLAW ENT FEI HRM ICS ITM/MIS MGT/IB MKT

Other: _____

I recommend: Approved Disapproved for the following reasons:

Date: ___/___/___ Signature: _____

IV. Undergraduate Director has Approved Disapproved for the following reasons:

Date: ___/___/___ Signature: _____