



OFFICE OF ADMISSIONS & RECORDS

5) ULGD . DKOR ODL 8 VH % XLOGLQJ • San Francisco, CA 94144 FAX 415 229 32856

WAIVER OF COLLEGE RULES & REGULATIONS

(Title 5 Regulations cannot be waived)

Student Name (print)			Student I.D #	Date of Birth
Last	First	MI		
Home Phone		Cell Phone	Address	
Email			City	State Zip

College Rule or Regulation to be Waived :

Reason for Waiver:

I am petitioning for waiver of the above College Rule or Regulation for the following reason/s:

Student Signature: _____ Date: _____

' 6XEPLW WR DGPLW#FFV Office of Admissions & Records, 0XOWL 8VH %XLOGL @dresiw '

FOR OFFICE USE ONLY

Completed by the Dean of Admissions and Records

† Approved † Denied

Comments : _____

Name: _____ Signature : _____

A&R Office: Received by: _____ Processed by: _____ Date: _____
A & R form - 05/20 ii