

College of
DESIGN
ARCHITECTURE
ART
PLANNING

Student Name _____ UCID _____
 Email _____ Phone _____
 Address where notification should be sent _____
 Student Signature _____ Date _____

Please complete application
 and return to:

Office of Student Affairs
 University of Cincinnati
 PO Box 210016
 Cincinnati OH 45221-0016

daap-admissions@uc.edu
 513-556-1376

TYPE OF APPEAL

LATE WITHDRAW (MUST BE ACCOMPANIED BY SIGNED ADD/DROP SLIP)

Course Number _____ Credit Hours _____ Level—Undergrad / Grad _____
 Academic Year _____ Fall Spring Summer

CHANGE OF GRADE (DAAP ADMINISTRATION WILL FOLLOW UP WITH FACULTY MEMBER FOR CHANGE OF GRADE FORM IF APPROVED)

1–4 years old Change of grade to “w”

Course Number _____ Credit Hours _____ Level—Undergrad / Grad _____
 Academic Year _____ Fall Spring Summer

Grade is recorded as _____ Correct Grade _____

REASON, as provided by the faculty member supporting petition (continue on back)

 Faculty member supporting petition signature _____ Date _____

FOR OFFICE USE ONLY

ACTION TAKEN

- Approved
- Denied

ACTING BODY

- DAAP Student Affairs
- Committee

_____ Date _____

