

UFID _____ Last Name _____ First Name _____ MI _____

Mailing Address: _____
Street address Apt City State Zip

Email Address: _____ Phone Number: _____

Note:

- This form can only be used to request the removal of courses currently listed on a student's excess hour surcharge counter, courses registered in previous semesters or on the student's current term registration. Students cannot petition the removal of courses they have not registered for from excess hours.
- All course exemption decisions for excess hours are made pursuant to Florida State Statute 1009.286(4). Review excess hour exemptions at <https://one.uf.edu/> > Student Self Service > Degree Audit > Excess Hour Surcharge > Appeals and Deadlines.
- Please be aware, excess hours are only adjusted 3 times per semester - beginning, middle, and end. Depending on the timing of your submission, if approved, any applicable refunds and/or changes to your academic record may take 2 to 3 months for processing.

Instructions:

- In the space below, or in an attached statement, students must list the course(s) they believe should not be counted in their excess hours and explain how they meet the exemptions listed in state statute 1009.286(4).
- Students should submit supporting documentation to substantiate the claim made in their statement.
- **Petitions for refunds** should be submitted within 6 months from the close of the petitioned term.
- Students should keep a copy of all submitted petition materials for resubmission if necessary.
- **Review your petition decision** and/or request for additional information at <https://one.uf.edu/> > Student Self Service > My Record > Petition Status.

In the space below list the course(s) and term(s) you are requesting to be removed from your excess hours. Explain how it meets the exemptions listed in State Statute 1009.286(4).

Course(s): _____

I hereby certify that the information submitted for this petition is true and accurate to the best of my knowledge.

Student's Signature: _____ Date: _____

*****BELOW IS FOR COMMITTEE USE ONLY*****

Committee Action: Approved Denied Deferred

Notes/Comments: _____

Authorized Signature: _____ Date: _____