

CALIFORNIA INSTITUTE OF TECHNOLOGY

M/C 230-87, Room 230 Center for Student Services, gradofc@caltech.edu

Underload Petition

UID _____

Last Name _____

First Name _____

Option _____

Year Entered Caltech _____

Current Degree _____

Expected Completion Date _____

Email _____

Students are responsible for obtaining all of the necessary recommendations prior to submitting the final petition for approval to the Office of the Dean of Graduate Studies. If additional documentation is specified, please attach relevant materials to the petition prior to submission.

Institute regulations state that a graduate student must be registered for 36 or more units to be classified as a full-time student and be eligible for Institute financial support unless they have obtained prior permission from the Dean of Graduate Studies.

I hereby request the following exception:

Total course/research units (Attach a current unofficial transcript) _____

Total assistantship hours per week _____

Term (Please select one): Fall Winter Spring

Academic Year _____

Date

Student Signature

- Recommended
- Not Recommended

Date

Option Representative Signature

- Approved
- Not Approved

Date

Dean of Graduate Studies Signature