

UCLA Asian American Studies Department

Course Petition

Complete the following information and attach the course syllabus of the course to be reviewed.

Name:		UID:	
Email:		Telephone:	

INDICATE WHICH APPLIES TO YOU:	Major	Minor	Graduate	Graduate Concentrator

Term (Quarter, Year):		Subject Area:		Course Number:	
Course Title:					
Petitioning for:					

RATIONALE	
Signature:	Date:

DEPARTMENT REVIEW ONLY	
Name:	
Signature:	
Date:	
Notes:	