



**Minnesota
North College**
A Member of Minnesota State

General Petition Form

Minnesota North College
Records Office
1515 East 25th Street
Hibbing, MN 55746
records@minnesotanorth.edu
Phone (Local): 218.293.6850
Phone (Toll free): 888.223.8068

Student Information

Full Name: _____

Last

First

Middle

Current Address: _____

Address

City

County

State

Zip

Home Phone: (____) _____ Cell Phone (if different): (____) _____

Email Address: _____ Date: _____

Star ID: _____ or Tech ID Number: _____

Campus: Select one campus

- | | | |
|---|--|---|
| <input type="checkbox"/> Hibbing | <input type="checkbox"/> Itasca – Grand Rapids | <input type="checkbox"/> Mesabi – Eveleth |
| <input type="checkbox"/> Mesabi – Virginia | <input type="checkbox"/> Rainy River – International Falls | <input type="checkbox"/> Vermilion – Ely |
| <input type="checkbox"/> Minnesota North College – Online | | |

I respectfully petition the following:

- | | |
|---|--|
| * _____ Transfer Credit Appeal (Academic Dean) | _____ Refund of Res. Hall Deposit (Director of Facilities) |
| _____ Withdrawal after Deadline (Petition Committee) | _____ Res. Hall Contract Cancellation Request (Director of Facilities) |
| _____ Course/Program Requirement Variance (Academic Dean) | _____ Res. Hall Length of Stay Adjustment (Director of Facilities) |
| _____ Graduation Requirement Variance (Academic Dean) | _____ Lift Business Office Hold (VP of Finance & Facilities) |
| _____ Enroll in More Than 22 Credits in a Term (Petition Committee) | _____ Lift Registration Hold (AVP of Student Affairs) |
| _____ Late/Retro Drop after Drop/Add Period (Petition Committee) | _____ Waiver /Refund Due to: (VP of Finance & Facilities) |
| _____ Late/Retro Add after Drop/Add Period (Petition Committee) | <ul style="list-style-type: none"> • medical reasons • college error • ward of state |
| _____ Early Final Exam (Campus Lead) | <ul style="list-style-type: none"> • significant personal circumstances • employment related condition |
| _____ Course Substitution (Academic Dean) | _____ Other |

**If you are dissatisfied with the outcome of your petition to have transfer coursework accepted and/or applied to an academic requirement, you have the right to appeal at the Minnesota State system level.*

State your request, reasons, and arguments clearly and concisely giving dates when condition/circumstances happened. If insufficient information is provided, this form will be denied. (Attach additional sheets if necessary)

By signing this form, I certify that the information I have provided is accurate, true, and complete. I understand that I am responsible for making necessary payment arrangements for any charges I owe Minnesota North College regardless of the outcome of my petition.

Student Signature

Date

Counselor/Advisor Signature

Date

*****Email this completed form with documentation to records@minnesotanorth.edu*****

FOR OFFICE USE ONLY:

Petition Approved _____ Petition Denied _____ Approved with Conditions _____

Comments/Conditions:

Decision Maker Signature

Date