



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

## General Petition Form

Minnesota North College  
Records Office  
1515 East 25<sup>th</sup> Street  
Hibbing, MN 55746  
[records@minnesotanorth.edu](mailto: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 State Zip  
Home Phone: (\_\_\_\_) \_\_\_\_\_ Cell Phone (if different): (\_\_\_\_) \_\_\_\_\_  
Email Address: \_\_\_\_\_ 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 |  |   |

### Program of Study \_\_\_\_\_

*Identify all programs of study that this petition would apply*

### I respectfully petition the following:

- |  |  |
|--|--|
| * _____ Transfer Credit Appeal (Academic Dean)                           | _____ Course Substitution (Academic Dean/Faculty)            |
| _____ Withdrawal after Deadline (Petition Committee)                     | _____ Lift Business Office Hold (VP of Finance & Facilities) |
| _____ Course/Program Requirement Variance (Academic Dean)                | _____ Lift Registration Hold (AVP of Student Affairs)        |
| _____ Graduation Requirement Variance (Academic Dean)                    | _____ Waiver /Refund Due to: (VP of Finance & Facilities)    |
| _____ Enroll in More Than 22 Credits in a Term (Petition Committee)      | • medical reasons      • significant personal circumstances  |
| _____ Late <b>Drop</b> after Drop/Add Period (Petition Committee)        | • college error         • employment related condition       |
| _____ Late <b>Add</b> after Drop/Add Period (Petition Committee/Faculty) | • ward of state  |
| _____ Early Final Exam (Campus Lead)                                     | _____ 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.

\_\_\_\_\_  
Student Signature (required)      Date

\_\_\_\_\_  
Counselor/Advisor Signature (required)      Date

\_\_\_\_\_  
Faculty Signature (if required)      Date

**\*\*\*Email this completed form with documentation to [records@minnesotanorth.edu](mailto:records@minnesotanorth.edu)\*\*\***

FOR OFFICE USE ONLY:

Petition Approved \_\_\_\_\_

Petition Denied \_\_\_\_\_

Approved with Conditions \_\_\_\_\_

Comments/Conditions/Rationale:

\_\_\_\_\_  
Decision Maker Signature

\_\_\_\_\_  
Date

Actions Taken/Date Student Notified:

\_\_\_\_\_  
Student Services Office Signature

\_\_\_\_\_  
Date