Instructions:

- Provide all Student, Academic Advisor, and Registration Information requested (pages 1 and 2).
- Print your statement in the Student Statement box below. Sign and date your statement.
- Ask your Freshman Advisor to write a brief statement in the box on page 2. Have your advisor sign and date her or his statement.
- Ask Dean Elizabeth Cogliano Young (7-103) to check the appropriate box on page 2, indicating whether or not she supports your petition, and to add her signature and the date.
- Submit the completed petition to the CAP Administrator in 7-104 in time for review during the first CAP meeting in the term in which you want to exceed the Warning Credit Limit. Submission deadlines are posted on the CAP website at http://mit.edu/acadinfo/cap/petitions/deadlines.html.
- Note: If your petition is approved, the Registrar’s Office will add a $25 processing fee to your MITPAY account.

Student Information

<table>
<thead>
<tr>
<th>Last Name</th>
<th>First Name</th>
<th>Middle Initial</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Email Address</th>
<th>Telephone</th>
<th>MIT ID</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Registration Information

<table>
<thead>
<tr>
<th>Term to Exceed Limit</th>
<th>Proposed Total Number of Units</th>
<th>Subjects to be Taken</th>
</tr>
</thead>
<tbody>
<tr>
<td>Subject Number</td>
<td>Units</td>
<td>Subject Number</td>
</tr>
<tr>
<td>Subject Number</td>
<td>Units</td>
<td>Subject Number</td>
</tr>
</tbody>
</table>

Student Statement (Continue on page 2 or attach an additional sheet if necessary.)

Please answer the following questions. What are your educational reasons for seeking to exceed the freshman credit limit for this term? What evidence indicates your ability to complete this work successfully?

____________________________________  _____________________
Signature of Student                  Date
Academic Advisor Information

<table>
<thead>
<tr>
<th>Name of Academic Advisor</th>
<th>Room</th>
<th>Email Address</th>
</tr>
</thead>
</table>

Academic Advisor Statement (may also be emailed to cap-help@mit.edu)

Answer the following questions. To what degree do you support this student’s request to exceed the Freshman credit limit? What evidence can you provide that indicates the student’s ability to complete this work successfully?

__________________________________________
Signature

_______________________
Date

Statement of Dean, Office of Undergraduate Advising and Academic Programming

☐ I support this petition and recommend that CAP approve it.
☐ I do not support this petition and recommend that CAP deny it.

Signature

______________________________
Date

Elizabeth Cogliano Young, Associate Dean, UAAP (7-103)

Student Statement, continued if necessary

For Office Use Only – Do Not Write Below This Line

<table>
<thead>
<tr>
<th>Petition Number</th>
<th>Date Petition is Complete</th>
<th>Previous Neglect</th>
</tr>
</thead>
</table>

Petition Review

☐ Approved
☐ Approved with Neglect
☐ Denied
☐ By Chair
☐ By Committee

Staff Initials

CAP Date Stamp