California State University, Sacramento
Department of Art

Supervisory Course Petition

This petition is to be used only for the following 3-unit courses: Art 119, 129, 139, 149, 159, 169, 179, 189, 219, 229, 239, 249, 259, 269, 279, and 289. To be used during the first four weeks of the semester only. No courses can be added after “Census Date” except under special circumstances.

Instructions for filling out and submitting petition:
1. Discuss your project with instructor, fill out petition, and get instructor’s signature.
2. Submit completed form to the Art Department (Kadema 185) to get Department Chair’s signature and so that Art Department staff can register you for the class.
3. Check MY SAC STATE after two business days to confirm that you have been registered for the class.

Semester and year: _________________________________
Course Number: ART_____________________________
Class Number (5 digits) _________________________________
Student’s Name: __________________________________________________
Student ID Number (not SS#) __________________________________
Home Address: _______________________________________________________________________
Phone: _____________________________ E-Mail: ___________________________________________

Status: Undergrad. (Major/Concentration:__________________________)
(Class Level: JR SR [upper division status required])
Graduate (Area: _____________________; Classified: ______; Unclassified: ______)
Second BA Open University Other (________________________)

Preparation: List 3 courses (or 1-2 courses and relevant experience) that have prepared you to do independent study in this area:
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

Project description: Summarize what you will do during the semester, and what the final product(s) will be (may be continued on a separate page, if necessary). _________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

Name of Instructor (printed) __________________________ Signature of Instructor __________________________ Date __________________________

Signature of Department Chair __________________________ Date of Enrollment (Added by Art Office) __________________________

Supervisory Course Petition (rev. 9/12/08)