

Credit Standing (CR) Grade Request Regulation 3(h)

Submit to: qse.apc@queensu.ca

	Given Name:	Studen	t Number:
Academic Plan/Sub-plan:	Year of Study:	Queen	's Email Address:
Student Signature:		Date:	
Personal information collected on this information collected on this form man Queen's personnel who need the info how it will be used, please contact the Applied Science, Beamish-Munro Ha	ay be retained in the student's file, w rmation to perform their duties. If yo e Freedom of Information and Protec	ill be used to process this u have any questions about	s request, and will be shared wi out the information collected or
Regulation 3h: Credit standing ((CP) is a narmanent designation	normally recerved for	avcantional cases where
students, who have completed all illness or other extenuating circu been expected. A student seeking instructor) and appropriate support consideration. If the request is gradeter grade. CR grades will not be Students may be granted credit students that the credit standing must be submitted.	mstances beyond their control, egacredit standing in a course mustorting documentation to the Smit ranted, the designation CR will a per included in the student's GPA tanding for a maximum of 18.0 upon the student of	arned a substantially last submit their request a Engineering Faculty ppear on the student's and cannot be reversunts during their entire	ower grade than might have (supported by their course Board Committee for transcript in place of a sed to a letter grade. The program. Requests for
Course Code/Number	Course Instructor Name:		Instructor Email:
PI FASE NOTE: Credit Standin	g (CR) grade requests are only a		
extenuating circumstances (that is official documentation, e.g. medi In the space below, please summa	s, circumstances beyond a studer cal certificate, counsellor's letter arize the official documentation	, etc.)	
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	Course Instructor Signature:		Date:				
	To be completed by your Undergraduate Chair						
	Do you support this request: Yes No						
	Please provide any further information in the space below:						
	Undergraduate Chair Signature:		Date:				
	For Faculty Office Use Only:						
	Approved	Comments:					
	☐ Denied						
	APC Chair Signature:	Date:					