

When completed, submit this form and any supporting documents to your assigned academic advisor.

PETITION FORM

NAME: _____ ID NUMBER: _____

ADVISOR: _____ DATE: _____ SEMESTER: _____

ACADEMIC PROGRAM/MAJOR: _____ LEVEL: BA BS MS PHD

TO BE COMPLETED BY THE STUDENT:

PETITION REQUEST: (State your request clearly. Please limit each petition form to one request each.)

JUSTIFICATION: (Thoroughly explain the reason for the request. Attach additional pages and documentation as needed.)

Student's Signature: _____ Date: _____
 () Attachments

TO BE COMPLETED BY THE SCHOOL:

INSTRUCTOR OR ADVISOR COMMENTS: (optional)

Signature: _____ Date: _____

DEPARTMENTAL COMMITTEE DECISION: APPROVED DENIED

Committee Chair Signature: _____ Date: _____

DISTRIBUTION OF FORM

Sent to: <input type="checkbox"/> Student	By: _____	Date: _____
<input type="checkbox"/> Office of the Registrar	_____	_____
<input type="checkbox"/> International Student Affairs Office	_____	_____
<input type="checkbox"/> Other _____	_____	_____