

COLLEGE OF ARTS AND SCIENCES ACADEMIC PETITION

(Note: This form is to be used to petition for waivers of graduation requirements.)

Please Print:

STUDENT'S NAME _____ STUDENT ID # _____

STUDENT'S ADDRESS _____

PHONE # _____ E-MAIL _____

My major is/ majors are: _____
My intended degree is/ degrees are: BA BS BM BME BFA
My expected graduation date is: _____
Month Year

PETITION FOR WAIVER OF GRADUATION REQUIREMENTS: I request that graduation requirements be modified in my case as follows: (Please use the back of the form or attach a separate sheet as needed, including any documentation relevant to the request.)

Student's Signature _____ Date _____

Advisor's Recommendation:

I (recommend/do not recommend) approval of this request because:

Advisor's Signature _____ Date _____

Dean's Action

I (approve/ do not approve) this request.

Dean's Signature _____ Date _____