

PETITION FOR DEGREE REQUIREMENTS

Important Instructions:

- + Use a ballpoint pen or typewriter to fill out this petition to ensure that all copies are legible. Make sure you fill out the bottom copy, as that is the one that will be returned to you with a decision.
- + Please submit all 4 copies. (Do NOT remove any copies.)
- + Attach a stamped, self-addressed return envelope to this petition.

Name: _____ PERM # _____
Last First Middle

Address: _____ Phone # _____
Street Apt. #
City State Zip E-Mail Address: _____

Major(s) _____ Expected Date of Graduation _____

- General Education Requirements
 Major Requirements
 Repeat/Credit Clarification
 Other _____

The following is my request: _____

The justification for my request: (attach any documentation) _____

Student's Signature _____ Date _____

Department/Program recommendation:

Approved
 Approved with conditions
 Denied

Comments from the Chair/Advisor: _____

Final action by the Dean:

Approved
 Approved with conditions
 Denied

Comments from the Dean: _____

Department Chair/ Faculty Advisor _____ Date _____

Dean _____

Sample - Do Not Submit