

**PETITION FOR SCIENCE & TECHNOLOGY STUDIES OFF-CAMPUS CREDIT**

**ATTENTION: FILE THIS PETITION IN 303 MORRILL HALL ONLY,  
PLEASE PROVIDE COURSE SYLLABUS AND OFFICIAL TRANSCRIPT**

Study abroad    o Summer school    o Transfer credit    o Other\_\_\_\_\_

Name \_\_\_\_\_ Theme \_\_\_\_\_  
College \_\_\_\_\_ Expected graduation date \_\_\_\_\_  
Local mailing address \_\_\_\_\_ Phone \_\_\_\_\_ E-mail \_\_\_\_\_

**YOUR COURSE SCHEDULE OFF-CAMPUS:**

Institution \_\_\_\_\_ Dates attended \_\_\_\_\_

<u>Course No.</u>	<u>Course Title</u>	<u>No. of credit hours</u>

I request permission to \_\_\_\_\_  
\_\_\_\_\_

My reasons for making this request are \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Student's Signature \_\_\_\_\_ Date \_\_\_\_\_

\*\*\*\*\*

**ADVISOR'S COMMENTS:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Advisor's Signature \_\_\_\_\_ Date \_\_\_\_\_  
Campus Address \_\_\_\_\_

**SCIENCE & TECHNOLOGY STUDIES OFFICE USE:**

**ACTION ON THIS PETITION:**            Granted            Denied

Reason for action: \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Director of Undergraduate Studies

9/12/17