

PETITION FOR SCIENCE & TECHNOLOGY STUDIES **ON-CAMPUS CREDIT**
ATTENTION: FILE THIS PETITION IN 303 MORRILL HALL ONLY,
PLEASE PROVIDE COURSE SYLLABUS AND COPY OF TRANSCRIPT

Name _____

College _____

Expected graduation date _____

Local mailing address _____

Telephone _____ E-mail _____

YOUR COURSE SCHEDULE THIS TERM:

<u>Dept. and Course Number</u>	<u>Course Title</u>	<u>No. of credit hours</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

I REQUEST PERMISSION TO _____

MY REASONS FOR MAKING THIS REQUEST ARE _____

ATTACH COURSE SYLLABUS AND COPY OF TRANSCRIPT.

Student's Signature _____ **Date** _____

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ADVISOR'S COMMENTS:

Advisor's Signature _____ **Date** _____

Campus address _____

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ATTENTION: FILE THIS PETITION IN 303 MORRILL HALL ONLY
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SCIENCE & TECHNOLOGY STUDIES ACTION ON THIS PETITION: _____ Granted _____ Denied

Reason for action: _____

Signature _____ **Date** _____

Director of Undergraduate Studies