



Department of Computer Science and Engineering

Petition Form

Student: _____ Date: _____
PRINT: Last First Middle initial

Student ID: U _____ Phone: _____

Address: _____
Street City State Zip code

Email: _____ Classification: _____

Request:

Reason:

Student signature _____ Date _____

Departmental Use Only: [] Approved [] Disapproved

Notes: _____

Department Chair or UG Program Director signature _____ Date _____

This petition is valid only for the current semester

Distribution: Original: UG Program Director, Student file Copy: Student