



PETITION TO DEAN'S OFFICE

NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ PHONE (Home): \_\_\_\_\_

\_\_\_\_\_ PHONE (Business): \_\_\_\_\_

E-MAIL: \_\_\_\_\_

YEAR (Circle one) 1 2 3 4 STATUS (Circle one): FTD PTD PTE LLM

ACTION REQUESTED: \_\_\_\_\_

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

EXPLANATION (Please be specific and use additional sheet if necessary): \_\_\_\_\_

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

SIGNATURE: \_\_\_\_\_

**FOR OFFICE USE ONLY**

DISPOSITION:

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

DATE: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

