

GRADUATE STUDENT PETITION

DATE:				
STUDENT NAME:	STUDENT ID:			
E-MAIL:	@JAGUAR.TAMU.EDU PHONE:			
DEGREE: MAJOR(S):	CATALOG YEAR:			
CONCENTRATION:				
THE DETITION IS FOR				
THIS PETITION IS FOR:				
☐ MAJOR COURSE REQUIREMENT	☐ WAIVER OF REQUIREMENT FIVE YEAR CATALOG POLICY			
☐ SUPPORT WORK COURSE REQUIREMENT	☐ WAIVER OF REQUIREMENT FIVE YEAR COURSE/S			
☐ REQUEST TO TRANSFER COURSE/S	POLICY			
☐ OTHER REQUEST:				

FOR COURSE SUBSTITUTIONS/COURSE LONGEVITY:

List the following information about the course that you want considered. In addition to your unofficial transcript printed from JagWire, you must also attach a course description and/or a course syllabus if requested substitute course is from another college or university.

REQUIRED COURSE	SUBSTITUTE Course-term	INSTITUTION NAME	JUSTIFICATION FOR SUBSTITUTON REQUEST	DECISION
				APPROVED DENIED

JUSTIFICATION FOR REQUEST:					
Please provide additional information to support your request, including your future career and academic goals. Be sure to include any supporting documentation, such as transcripts, syllabi or course descriptions. If you are requesting a waiver of a requirement, please provide a detailed explanation of your request. If you wish to appeal your reinstatement, you will need to provide a written statement, which you can adequately discuss the circumstances that contributed to your current GPA. Your letter should be addressed to the Dean of Graduate Studies, Dr. Ting Liu.					
INSTRUCTIONS FOR SUB	MISSION:				
your situation (i.e. medical, marriage, divordademic Advisor. Your Academic Advisor	ce, immediate family eme will route it to the approp	ficial transcript, and documents contributed to regency, or birth of a child), and submit to the riate offices for review. Petitions make take up and Dean of Graduate Studies are required for STUDENT PRINT NAME			
V	DATE				
ACADEMIC ADVISOR SIGNATURE	DATE	ACADEMIC ADVISOR PRINT NAME			
Х	DATE				
DEPARTMENT CHAIR SIGNATURE	□ APPROVED	DEPARTMENT CHAIR PRINT NAME DENIED			
X	DATE				
COLLEGE DEAN SIGNATURE	☐ APPROVED	COLLEGE DEAN PRINT NAME ☐ DENIED			
X	DATE				
DEAN OF GRADUIATE STUDIES SIGNATURE	DATE	DEAN OF GRADUATE STUDIES PRINT NAME			
	APPROVED	DENIED			
FORM ROUTING: Student > Faculty Advisor> Department Chair> College Dean> Dean-College of Graduate Studies> Faculty Advisor> Registrar					