

PETITION TO ACCEPT OUT-OF-DATE COURSES

Name			Date		
ID#		Major _			
Anticipated date of	graduation	Semester	_	Year	
I hereby petition th graduate degree.	e Graduate Schoo	ol to accept the	e courses	listed below toward my	
Reason for delay in	completion of d	egree:			
				Student Signature	
	COURSE INFO	RMATION A	ND VAL	IDATION	
CoursePrefix	Number	Title			
Semester	Year	Grade		Instructor of Record	
I certify the inform recommend that the	-			s still current and valid and	
Date		Instr	Instructor's Signature		
	N. A. 1				
Approved	Not Approved		Academ	nic Unit Head	
Approved	Not Approved		Academ	nic College Dean	
Approved	Not Approved		Dean of	Research and Graduate Studies	