



PETITION FOR GRADUATE STUDENT COURSE PROGRAM OF STUDY (CPOS):

STUDENT INFORMATION

<i>Name</i>			<i>Date</i>
<i>Banner</i>	<i>Program</i>	<i>Catalog Year</i> <i>Ex: 23-25</i>	
<i>Concentration/Track/Option</i> <i>(if applicable)</i>		☐ Certificate	☐ Master Select if Master's
			☐ Doctoral Select if Doctoral

Please indicate the section of the program of study: _____

JUSTIFICATION

APPROVALS

<i>Graduate Advisor of Record, Signature</i>	<i>Print Name</i>	<i>Date</i>
<i>Department Chair, Signature</i>	<i>Print Name</i>	<i>Date</i>
<i>Associate Dean, Signature</i>	<i>Print Name</i>	<i>Date</i>

THE GRADUATE SCHOOL

<i>Vice Provost and Dean of The Graduate School, Signature</i>	<i>Date</i>
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