

COLLEGE OF EDUCATION PETITION FORM

Name: _____ID number: _____ E-Mail: ______Phone: _____ Address:____ _____State: _____ Zip Code:___ City: ____ Minor, Concentration, Advisor Teaching Major or 2nd Major (circle one) 1. Complete this form (incomplete or unprofessional submissions will not be accepted). 2. If applicable, attach supporting documents, including a professional letter of explanation. 3. Print a current MSUB web transcript and attach to the form. 4. Obtain College of Education instructor, faculty advisor and department chair signatures. 5. Submit to the ETP Office, Room 209, College of Education. I petition the College of Education Appeals Committee to be allowed to deviate from the Teacher Education Program as follows (attach a professional letter of explanation if more space is needed): Student Signature _____ Date _____ ☐ I support the petition ☐ I do not support the petition Instructor's Recommendation: (if applicable) Instructor's Signature Date Rationale (please refer to College of Education policy and/or extenuating circumstances):

Faculty Advisor's Recommendation:	☐ I support the petition ☐ I do not support the petition
Advisor's Signature	Date
Rationale (please refer to College of Educ	cation policy and/or extenuating circumstances):
Unit Chair's Recommendation: Is	upport the petition I do not support the petition Date
Rationale (please refer to College of Educ	cation policy and/or extenuating circumstances):
Recommendation of the Appeals Con	nmittee:
☐ Approval ☐ Denial ☐ Approval with	n conditions:
Conditions:	
Recommendation of the Dean:	
☐ Approval ☐ Denial ☐ Return to Co	mmittee for reconsideration:
Reconsider:	
Dean's Signature:	Date