



## STUDENT PETITION

Student Name \_\_\_\_\_ Banner ID # \_\_\_\_\_

Email Address \_\_\_\_\_ Phone Number \_\_\_\_\_

Check One: Undergraduate FR SO JR SR Major \_\_\_\_\_

Graduate Trad. Atl.

I hereby request permission to:

[ ] **Take an overload of** \_\_\_\_\_ semester hours for the \_\_\_\_\_ semester \_\_\_\_\_.

[ ] **Take additional course with internship:** Course Number \_\_\_\_\_ Start Time/Days \_\_\_\_\_.

If your petition is approved and you are requesting to take a course as a transient student, you will receive instructions for transient course work approval from a Professional Education Services advisor.

[ ] **Waive course prerequisite of admission to teacher education for** \_\_\_\_\_ for \_\_\_\_\_ term.

Choose the applicable condition:

The student is scheduled to meet all requirements for admission to teacher education within the first two weeks of the term. If this condition is not met, the student will be dropped from the course.

OR

The student will not meet all requirements for admission to teacher education within the first two weeks of the term but is requesting the waiver for the reason provided in the justification below.

**ONLY ONE COURSE WAIVER OF THIS TYPE WILL BE APPROVED FOR THE ENTIRE PROGRAM.**

**THESE PROCEDURES ARE IN PLACE TO ENSURE THAT NO STUDENT VIOLATES STATE POLICY WHICH LIMITS ENROLLMENT IN PROFESSIONAL STUDIES COURSES TO FIVE (5) PRIOR TO ADMISSION TO TEACHER EDUCATION.**

[ ] **Other** \_\_\_\_\_

**Justification for Request:** \_\_\_\_\_

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

\_\_\_\_\_  
 Student Signature Date

[ ] Approved [ ] Disapproved  
 \_\_\_\_\_  
 Faculty/Departmental Advisor Date

\_\_\_\_\_  
 Faculty/Departmental Advisor (Print Name)

[ ] Approved [ ] Disapproved  
 \_\_\_\_\_  
 Professional Education Services Date  
 Designee\* (3464 Haley)

**\*Professional Education Services (PES) Designee**

Overload – PES academic advisor

Internship – Dr. Peggy Dagley, Director, PES

Waiver of teacher education prerequisite – PES academic advisor