petitions will be reviewed and **dis**ions will be made program faculty and other relevant personnel. The complete a final review to ensure all College and I appropriately considered. After the request is procvia email.

Petitions should be submitted as a PDF or Word of

- x Tampa: Student Academic Serviceseduradvise@usf.edu
- x St. Petersburg: DDeanna Barcelona datarcelo@usf.edu
- x SarasotaManateeCristyne Ramirez at cristyner@usf.edu

To be completed by the student

Name:	Date:
Email:	Major:
USF ID:	Campus:

Please provide a brief statement the box below regarding the nature of your request (what are you asking for?) and the reason for the request (why are you asking flory to additional space, a separate sheet of paper can be added to this petition.

- x If the request you are making is related to a medical condition, please do not attach any medical documentation to this petition. Medical documentation related to this request should be submitted to <u>Student Accessibil</u>services
- x If the request you are making is related to final internship, it will be routed to all stakeholders below including the Director of Field and Clinical Education; therefore, please be sure to include the semest**an**dyear of yourfinal internship in your personal statement.

Part I: To be completed by the Advisor:						
Approve	Disapprove	Other				
Comments:						
Signature:			Date:			
Part 2: To be completed by the Program Coordinator:						
Approve	Disapprove	Other				
Comments:						
Signature:			Date:			
Part 3: To be completed by the Department Chair:						
Approve	Disapprove	Other				
Comments:						
Signature:			Date:			
Part 4: To be completed by the						

Part 6: To be completed by the Director of Student Academic Services							
Approve	Disapprove	Other					
Comments:							
Signature:			ate: D				