Date:

DEPARTMENT OF GEOGRAPHY COURSEWORK PETITION FORM

	Student:		uNID:	
	Phone:	Address:		
	Circle one: (Freshma	an) (Sophomore) (Junior) (S	Senior) (MSGIS) (Mas	ter's) (Ph.D.)
	PLEASE PROVIDE CATALOG DESCRIPTIONS OF COURSEWORK IF APPROPRIATE			
	Proposed waiver:	Course Number: GEOG		
		Course Name:		
	Proposed Substitution:	Course Number: When taken:		
		Dept or Institution:		Grade Received:
		To be substituted for GEOG		(Name & Number)
	Proposed Elective:	Course Number:	se Number: When taken:	
		Dept or Institution:		_Grade Received:
	Reasons for petition:			
	Reviewer's comments:			
			Instructor/Committee Cha	air Signature
COMM	ITTEE ACTION:	Application approved		
		Application approved wit	th the following conditions:	
		Application not approved	I	
			Director of Undergraduat	e/Graduate Studies
			Director of Undergraduat	e/Graduate Studies

Department Chair