FRANKLIN & MARSHALL COLLEGE

Committee on Academic Status

PETITION

STUDENTS, please carefully read the following instructions:

1) This form must be signed by all appropriate persons concerned with the petition. In all cases the signature of an academic adviser is necessary.
2) A course instructor should not sign a petition if it concerns the Pass/No Pass grading option.
3) Advice regarding signatures may be obtained from the Associate Dean for Student Academic Affairs or the Registrar.
4) This form must be submitted to the Associate Dean of the College (Office of College House Administration, 623 College Avenue), who will notify you, in writing, of the Committee's decision.

PETITIONS MUST BE SUBMITTED BY 4:30 PM THE DAY PRECEDING THE MEETING

ACADEMIC ADVISERS AND COURSE INSTRUCTORS, please read the following:
Students have a right to petition; therefore, your signature indicates only that you have been informed of the petition. In addition to your signature on this form, please initial and date any attachments, as well as check the appropriate boxes indicating your support, opposition, lack of opinion, and/or intention to send additional information. Additional comments which you may consider to be helpful to the Committee may be sent directly to Dean O'Day at steven.oday@fandm.edu.

Student's Name ___________________________ Date ___________________________
Student's College Address ______________________ Box # _______ Telephone # ____________

I hereby petition the Committee on Academic Status

________________________________________________________________________

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(over if necessary)

☐ SUPPORT ☐ NO OPINION ☐ ADDITIONAL INFO TO FOLLOW

(a) Advisor ☐ SUPPORT ☐ NO OPINION ☐ ADDITIONAL INFO TO FOLLOW

☐ OPPOSE ☐ OPPOSE ☐ ADDITIONAL INFO TO FOLLOW

Date ___________________________

(b) Instructor ☐ SUPPORT ☐ NO OPINION ☐ ADDITIONAL INFO TO FOLLOW

☐ OPPOSE ☐ OPPOSE ☐ ADDITIONAL INFO TO FOLLOW

Date ___________________________

(c) Other ☐ SUPPORT ☐ NO OPINION ☐ ADDITIONAL INFO TO FOLLOW

☐ OPPOSE ☐ OPPOSE ☐ ADDITIONAL INFO TO FOLLOW

Date ___________________________

Committee Action: ____________________________ Date ___________________________

Approved ____ Denied ____ Tabled ____________________________

Associate Dean of the College