# CHEMISTRY AND BIOCHEMISTRY DEPARTMENT

## CHEMISTRY DEPARTMENT PETITION

[PLEASE PRINT NEATLY]

NAME:_____ USC ID:_____
(FOUND AT MYSC.EDU; USE NUMBER WITH LETTER IN FRONT)

TRACK/AREA:_____ ADVISOR: _____

SUBJECT OF PETITION:

- ☐ CORE COURSE SUBSTITUTION
- ☐ SPECIALTY COURSE SUBSTITUTION
- ☐ COURSE TRANSFER
- ☐ RELIEF FROM SUSPENSION
- ☐ EXTENSION OF SUPPORT (TYPICALLY FOR ONE SEMESTER ONLY) SEMESTER
  IS THIS THE FIRST REQUEST?
- ☐ WILL ADVISOR FINANCIALLY SUPPORT ADDITIONAL SEMESTER? _____ YES/NO
- ☐ OTHER _____

EXPLANATION: (STATE CLEARLY AND CONCISELY. IF SPACE IS INSUFFICIENT, PLEASE ATTACH STATEMENT.)

I AUTHORIZE THE PETITIONS COMMITTEE TO SEND THIS PETITION ELECTRONICALLY AS THEY DEEM NECESSARY. _____ YES/NO

**S**IGNATURE OF **P**ETITIONER: _____

**ATTENTION: PETITIONER, PLEASE SECURE THE APPROPRIATE SIGNATURES PRIOR TO RETURNING TO THE GRAD OFFICE.**
**ATTACH COPY OF COURSEWORK TO DATE, INCLUDING GRADES (CAN BE FOUND AT MY.SC.EDU).**

**P**ETITION **C**OMMITTEE **A**CTION: ☐ **A**PPROVE ☐ DISAPPROVE

**C**OMMITTEE **C**HAIRPERSON **S**IGNATURE: _____ **D**ATE: _____/_____/_____

_____ _____ **A**PPROVE: **YES** ☐ **NO** ☐
**A**DVISOR **S**IGNATURE DATE

_____ _____ **A**PPROVE **YES** ☐ **NO** ☐
**D**IRECTOR **OF G**RADUATE **S**TUDIES **S**IGNATURE DATE

_____ _____ **A**PPROVE: **YES** ☐ **NO** ☐
CHAIR OF DEPT SIGNATURE (NEEDED FOR EXTENSION OF SUPPORT) DATE

08/2020