PETITION FOR SUMMER SCHOOL COURSES

AFTER HAVING READ THE SUMMER COURSE APPROVAL FORM IN ITS ENTIRETY, SUBMIT THIS FORM AS AN ATTACHMENT.

NAME		CLASS	_MAJOR		BC e-mail		
20	SUMMER SESSION AT						
I AM FILING THIS PETITION BECAUSE THE COURSE(S) LISTED BELOW: do not meet for at least 5 weeks but for weeks do not meet for at least 35 hours but for hours							
DEPT &	COURSE TITLE HOST PTS / BARNARD PTS	DECLUDENT			URSE SHOULD RE		DESPITE NOT
		•	•				
	FOR THE COMMITTEE ON ACADEMIC S	STANDING:	APPROVEC	o:	DENIED:		
	SIGNATURE:			D	ATE:		
	COMMENTS:						