WILLAMETTE UNIVERSITY DEPARTMENT OF

PETITION

Date _____

_____ _____ _____ _____
Name Box No. Telephone Email address

_____ _____ _____
Degree and Major Principal Instrument Advisor

I hereby petition that I be allowed to (check and complete as appropriate:)

A Sply the following course toward fulfilling the graduation requirement _____

_____ _____ _____ _____
Subject Number Title Instructor To the signe

Other: _____ _

_____ _____ _____
_____ _____ _____
_____ _____ _____
_____ _____ _____
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_____ _____ _____
_____ _____ _____

_____

_____

_____

I have read the above and any attachments, and my position toward the petition is indicated in the box below.

Signature Favorable Neutral Opposed

_____
Academic Advisor

_____
Instructor

_____
Instructor

COMMITTEE ACTION:

This petition has been:

granted denied other (see note)

Date: _____

Chair: _____

CC: Music Office
Chair
Student

Front office/forms/music petition