

Petition
Department of Mathematics and Statistical Science, University of Idaho

Date: ___/___/___

Student Name: _____

Advisor: _____

Student ID: _____

Catalog Year: _____

Student Email: _____

Student Phone: _____

Major: _____

Degree: _____

Minor: _____

Petition: _____

List of Mathematics and Statistics courses taken:

| Course Number | Grade |
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| Course Number | Grade |
|---------------|-------|
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Petition Committee's Action:

_____ __/__/__
Petition Committee Member Date

_____ __/__/__
Department Chair Date