



# ACADEMIC PETITION FORM

YOU MUST KEEP A COPY OF THIS SIGNED DOCUMENT FOR YOUR RECORDS.

Name of Student \_\_\_\_\_ Date \_\_\_\_\_

Program \_\_\_\_\_ Concentration \_\_\_\_\_

I respectfully petition the Faculty and/or Administration of GIAL:

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

Approval: (obtain the following signatures as appropriate)

**Approval Denial**

_____ Signature	_____ Course Head	_____ Date
_____ Remarks:		

_____ Signature	_____ Department Head	_____ Date
_____ Remarks:		

_____ Signature	_____ Dean of Academic Affairs	_____ Date
_____ Remarks:		

Return completed form to the GIAL Registrar's office.