

Academic Petition

100 Seymour Road, Utica, New York 13502 • Phone: (315)792-7262

Used to request waivers of college policy.

Instructions: Be specific and include all relevant information to support your request. Attach additional sheets as needed. Please submit the completed petition to your instructor or advisor who will forward the form for appropriate approvals.

Student Name: Ashley Vertucci SUNY Poly ID: U00279764

Program/Major: Information Design & Technology

Address: _____
Street City State Zip

E-mail: _____ Phone: _____

Specific Action Requested: Approve IDT 524: Websphere Analysis to satisfy methods requirement


Justification: _____

Student's Signature Date

Instructor – Comments or signature as needed. ☐ Approved ☐ Disapproved

Required Signatures

Additional signatures that may be required will be obtained by the Registrar's Office

 Signature of Advisor	<u>5 Oct 2016</u> Date	<input checked="" type="checkbox"/> Approved <input type="checkbox"/> Disapproved	_____ Signature of Provost	_____ Date	<input type="checkbox"/> Approved <input type="checkbox"/> Disapproved
_____ Signature of Academic Chair/Dean	_____ Date	<input type="checkbox"/> Approved <input type="checkbox"/> Disapproved	_____ Signature of President or SVP/COO	_____ Date	<input type="checkbox"/> Approved <input type="checkbox"/> Disapproved
_____ Signature of Registrar	_____ Date	<input type="checkbox"/> Approved <input type="checkbox"/> Disapproved	_____ Signature of Bursar/Financial Aid	_____ Date	<input type="checkbox"/> Approved <input type="checkbox"/> Disapproved

Comments: _____

Registrar's Office Use Only:

Distribution by Registrar's Office ONLY
Copy will be sent to student's SUNY e-mail.

Distributed by: _____ Date: _____