

School of Engineering and Applied Sciences

Student Petition

Student Name:	
Class:	
Email:	
Phone:	
Program:	

Request for credit towards concentration:	Details/reason for request:
Summer course <input type="checkbox"/>	
MIT course <input type="checkbox"/>	
Other course <input type="checkbox"/>	

For Adviser Use Only	For Director of Undergraduate Studies Use
Approved: <input type="checkbox"/>	Approved: <input type="checkbox"/>
Denied: <input type="checkbox"/>	Denied: <input type="checkbox"/>
Conditions: _____ _____	Conditions: _____ _____
_____ <i>Adviser</i>	_____ <i>DUS</i>
_____ <i>Date</i>	_____ <i>Date</i>