**Undergraduate Petition On Line Form**

Date Submitted: \_\_\_

**Required Materials for Department Petition**

* This completed Department Petition form
* Copy of ESE programming sheet (if you have been programmed)
* Copy of GK registration form indicating date of scheduled testing (if applicable)

**Submit petition via email to Dr. Lawrence A. Heiser, chair of ESE Petition Committee (**lheiser1@fau.edu)

**Student Data**

**(***Please type information in yellow spaces provided. ALL information must be provided.)*

**Student Name** \_\_\_ **Student Z #\_**

**Address**:\_\_  **Cell** **Phone #** ( )\_\_

**City:** \_\_ **State** \_\_ **Zip** \_\_

**FAU email address**:\_\_\_\_\_ **Other email**:\_\_\_

**PLEASE PROVIDE THE FOLLOWING INFORMATION**

**Dates:** Enrolled at FAU \_\_\_ Accepted in the College of Education\_\_\_

Accepted in the ESE program \_\_ Projected Graduation Date \_\_\_

**Overall GPA** \_\_\_ As of (semester) \_\_\_ (Year) \_\_\_

**Scores for General Knowledge Test & Number of times each section taken**:

*Math* score \_\_ # of times taken\_\_\_

*Reading Comprehension score* \_\_ # of times taken \_\_\_

*English Language Skills* score \_\_ # of times taken \_\_\_

*Essay score* \_\_ # of times taken \_\_\_

List courses repeated (prefix and number, if “none” please indicate) \_\_\_\_\_\_\_

* **Current Semester Schedule:** *List all courses (ESE and non-ESE)*

|  |  |  |  |
| --- | --- | --- | --- |
| **Course** | **Instructor** | **Campus** | **Current grade** |
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**Please Check The Reason You Are Petitioning**

\_\_\_\_ to be allowed to **Continue in ESE sequence** of courses for the \_\_\_ spring semester \_\_\_ summer semester

\_\_\_\_**Take course out of sequence** Name the Course \_\_

\_\_\_\_**General Knowledge Test** (Provide date will take General Knowledge Test \_\_) You will also need to provide a copy of your registration for the GK.

\_\_\_\_ **GPA** is below required 2.5

\_\_\_\_**Other**: Please specify:\_

* **Provide a paragraph explaining the reason for the petition request:**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**For office use only** (do not complete)

**Petition Committee Action:**

Approve \_\_\_\_\_\_\_ Deny \_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_ Notes:

ESE Petition committee Chair Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**ESE Dept:**

Program Date: \_\_\_\_\_\_\_\_ Exit GPA \_\_\_\_\_\_\_ Graduation Date \_\_\_\_\_\_\_\_\_

Other Documentation

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