

Neuroscience Graduate Program General Petition Form

Name: _____ ID#: _____

Phone #: _____ Email: _____

Cohort Year: _____

Request:

- Oral Qualifying Exam or Dissertation Defense Faculty Remote Participation (List name(s) below):

Required Course	Units	Substitution	Units

- Summer Internship: _____
Company/start date
- Extension of Time to Complete Degree: _____
Through your final semester
- Leave of Absence: _____
For the following semester(s)
- 794 a&b Concurrent Registration: _____
Semester
- Program Withdrawal: _____
For the following semester
- Readmission: _____ Semesters absent: _____
For the following semester *Must be < 4*
- Other

Please provide a short explanation of your request in the lines below. Please attach additional paperwork if necessary.

Student's signature: _____ Date: _____

Faculty Advisor Signature: _____ Date: _____

Director Signature: _____ Date: _____

International students requesting a Leave of Absence must obtain a signature from the Office of International Services (GFS 120)

The student's visa requirements have been reviewed and the request for a Leave of Absence is hereby recommended.

OIS Signature: _____ Date: _____