BU College of Engineering

GRADUATE PETITION FORM

Students: Please complete all fields outlined in blue and sign by typing into the appropriate field. Please e-mail the completed form to your advisor for review; you may need to meet with your advisor to discuss your petition. General questions about petitions should be sent to enggrad@bu.edu.

Name: _____ BU ID#: _____

Major: _____ Advisor: _____ Class Year: _____

E-mail Address: _____ Phone Number: _____

Petition:

Reason:

_____
Student's Signature

_____
Date

Advisor: Please review the student petition and indicate your recommendation and any comments in the fields outlined in red below. Please digitally sign and submit the form via e-mail to enggrad@bu.edu

☐ Recommend
☐ Do Not Recommend

_____
Advisor's Signature

_____
Date

Comments:

Office Use Only

DEPARTMENT

☐ Recommend
☐ Do Not Recommend

_____
Departmental Signature

_____
Date

Graduate Programs Office

☐ Approve
☐ Deny

_____
Associate Dean's Signature

_____
Date

Comments: