



COUNSELING DEPARTMENT

3. If approved, submit the petition to the Admissions and Records Office (E1-105 or South Gate Admissions) adhering to the add deadline dates.

Term: Fall Winter Spring Summer One Summer Two Year: _____

Student ID: _____ DOB: _____

Last Name: _____ First Name: _____

Counselor Check all those that apply (form will not be processed if left blank):