

## UNDERGRADUATE STUDENT REQUEST FORM

Use for all special requests (i.e. Course substitutions, courses taken out of sequence or without pre-requisites, transferred courses, permission to continue under probationary status)

Name Street		Student I.D.	Number	Phone	Phone State/ Zip Code	
		City		State/ Zip Code		
Major/Specialization		e-mail Add	ress			
Request and Ra	ationale (Please be speci	ific)				
Student's Signatur	re Date					
RECOMMEN						
MAJOR ADVIS	OR					
			Advisor Signature		Date	
DECISION	Approve	DENY				
			Signature	Date		

RETURN THIS FORM TO: School of Business Student Services, Founders Hall Room 3301 Campus Box 1186 - (618) 650-3840