CaSB UNDERGRADUATE COURSE PETITION

Name:		UID:	Date:	
Email:	_ Major: CaSB Concentration:	Catalog Year:		
My request is (one per form):				
The reason(s) for my request is:				
The attached items are in support of m	v roquest			
The anachea aems are in support of m	y requesi.			
does NOT guarantee approval. There are some petition requests	ny request for consideration by the C that are referred to the faculty for rec	commendation and will take	a MINIMUM of 1-2	
Date:Studen	t Signature:			
For Use by Computational & Systems Biology IDP Only				
Referred to:		Decision (circle one):	APPROVED	DENIED
Notes/Conditions:				
Date:Signature				
Counselor Comments:		Petition #		