INTERNAL COLLEGE OF EDUCATION PETITION
IDAHO STATE UNIVERSITY

_____ _____ _____

Name of Student (print) **Student Number** **Date**

_____

Mailing Address (Please include city and zip code)

_____ _____

Phone Number **e-mail Address**

Graduating Catalog Year _____ **Circle all that apply.** **Level (Fr, So, Jr. Sr)**

Degree Sought: **Certifier Only** **BA** **BS** **BME** **Program:** **El Ed** **Sec Ed** **PE** **SPED** **FCS**

Secondary Major/Minor _____ **Elementary Emphasis Area** _____

I petition to be allowed to deviate from College policy and/or regulations as follows:

_____

_____

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_____

Student Signature

(Do not write below this line. If more space is needed, attach one copy of additional material.)

Purpose of Petition:

- ☐ **Education Requirements**
- ☐ **Certification Requirements**
- ☐ **Student Teaching Internship**
- ☐ **Admission to Physical Education Program**
- ☐ **Admission to Teacher Education Program**
- ☐ **Other**_____

Explanation: _____

_____

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_____

(Recommend) (Do Not Recommend) _____

(Advisor/Instructor) **(Date)**

Explanation: _____

_____

_____

_____

_____

_____

(Recommend) (Do Not Recommend) _____

(Program Advisor/Department Chair) **(Date)**

Explanation: _____

_____

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_____

(Recommend) (Do Not Recommend) _____

(Associate Dean) **(Date)**

College of Education retain copies of this petition. Results will be mailed to student. Please remit petition, any supporting documentation and copy of unofficial transcript to ISU College of Education, Student Advising, Campus Stop 8059, Pocatello, Idaho 83209 (phone 208-282-2447)

Revised 9/19/11