## Aerospace Engineering Petition

Please complete return to the Student Programs Coordinator at AMEstudentservices@ou.edu no later than Monday, August $\mathbf{1 2}^{\text {th }}, 2024$ by 5 p.m. CST to be considered for the Fall 2024 semester.

Name of Petitioner: $\qquad$ OU ID\#: $\qquad$ Date: $\qquad$
Current Address: $\qquad$ Daytime Phone: $\qquad$
E-mail Address: $\qquad$
Date of Graduation: $\qquad$ GPA: $\qquad$
I ask to be relieved of the requirements listed below and to be allowed to substitute an equivalent number of credit hours.

| To be relieved from: |  | *Course to be substituted |  |  |  |  |
| :--- | :--- | :--- | :--- | :--- | :--- | :--- |
| Course | Hours | Course | Hours | Grade | Institute | When Taken |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
| Total Hours |  | Total Hours |  |  |  |  |

*Are you currently enrolled in the course?
*Have you attempted this course previously?
*Do you have a declared minor or are you planning to pursue a minor?
*Reason for this request (please attach on a separate page):
Signature of Petitioner:
Instructor Recommendation (if available): Name: $\qquad$ Date:

Signature: $\qquad$ Date:

$\qquad$

|  | Decision of: |  |  |
| :---: | :---: | :---: | :---: |
| Parthasarathy: Approve | $\square$ | Attar: Approve $\quad \square$ |  |
| Deny | $\square$ | Deny $\quad \square$ |  |
| Vedula: Approve | $\square$ |  |  |
| Deny | $\square$ |  |  |

Faculty Recommendation (If Necessary): Approve/Deny $\qquad$ Date:

Signature: Director's Recommendation: Approve/Deny
Date

