
Date Submitted

University of South Carolina
School of Journalism and Mass Communications
Petition Form

Student Name: _____ SSN: _____

Address: Street: _____

City: _____ State: _____ Zip: _____

E-Mail: _____ Phone #:(H) _____ (Wk) _____

Major: Advertising Public Relations Visual Communications Electronic Print

Reason for Petition: Waive 30 hour requirement Waive Academic Requirements

Waive Entrance Requirement Clarification of Transfer Credit

Other _____

I hereby authorize release of my confidential records to committee members or their designated agents.

Signature

Date

Reason for Petition (Please type an explanation for your petition and provide any supporting documentation that you believe will help the committee make their decision.)

Academic Advisor (Approved) (Disapproved) Date _____ Signature _____

Sequence Head (Approved) (Disapproved) Date _____ Signature _____

Director (Approved) (Disapproved) Date _____ Signature _____

Committee Action: (Approved) (Disapproved) (Conditional Approval)

Committee Chair Signature _____ Date _____

Committee Conditions for Approval: _____

CC: Admissions Committee File Professor Records Office Student File

Form must be return to the Student Services Office, Rm. 4001 Carolina Coliseum, for processing.