# GRADUATE STUDENT PETITION FORM

## Student Information

Today’s Date __________________

Name________________________ NU-ID#__________________

Local Address ______________________________________________

__________________________________________________________

E-mail ________________________ Phone#______________________

Program (Circle One) MA/ MPA/ PhD

## Request

Please outline your request below or on attached petition. Certain special circumstances, (such as transfer credits, directed studies, etc.) require different forms be completed with the Graduate School. If uncertain what steps to take, please refer to the Department program guide or contact the Administrative Coordinator of Graduate Programs.

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## Signatures

Please read the following and sign below: To the best of my knowledge, all the above and attached information is correct. Additionally, I acknowledge that I have read and understand all relevant program requirements as outlined in the program guide for the year in which I started my current graduate program, as well as any other official Northeastern regulations as outlined in other student handbooks.

_________________________                      ____________________
(Student Signature)                        (Date)

## Other Required Signatures

Academic Advisor* - Printed Name (Signature) (Date)

Program Chair - Printed Name (Signature) (Date)

*or other relevant faculty person consulted regarding petition