## BINGHAMTON

UNIVERSITY

STATE UNIVERSITY OF NEW YORK

Thomas J. Watson School of Engineering and Applied Science

## FOR WATSON SCHOOL UNDERGRADUATES AT BINGHAMTON UNIVERSITY PETITION TO TAKE COURSE AT ANOTHER INSTITUTION

Please print ast name			Fire	First name		<u></u>
tudent B number		Date of birth		Major		
ocal/campus address						
-mail address				Loc	Local phone ()	· · · · · · · · · · · · · · · · · · ·
lome/permanent address	\$ \$ 1			Hon	Home phone ()_	Control of the contro
NOTES:  1. Watson School students must petition to take all courses they intend to complete at other institutions.  2. Fill out all information requested. Provide a catalog description for each course.	ıst petition to take a sted. Provide a cata	Il courses they intend to	complete at oth	er institutions.		
<ol> <li>lake the completed petition to:</li> <li>a. Your department chairperson or faculty adviser for hit is NOT needed for N, P, H, A, G or Body/Wellness</li> <li>b. The Watson School Advising Office, *** Transcription of the course have an official transcription.</li> </ol>	to:  Prson or faculty advi H, A, G or Body/V Ising Office,	ser for his/her signature. Department signature Vellness.  III., for signature and distribution. EB MOO	Department sig	lake the completed petition to:  a. Your department chairperson or faculty adviser for his/her signature. Department signature is only needed for Math, Science, Computer Science and Engineering. It is NOT needed for N, P, H, A, G or Body/Wellness.  b. The Watson School Advising Office, ************************************	th, Science, Computer	Science and Engineering.
Institution	Course number	Title	Semester hours	Requirement to be satisfied (course equivalency)	Expected dates of attendance semester/year	Signature of approval by dept. chairperson or faculty adviser
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Watson Advising approval			-		Date processed	;ed
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