

Received _____ By _____
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# SYRACUSE UNIVERSITY

## College of Arts & Sciences

### Advising & Career Services

## Petition to Receive Committee Sponsorship

Name (Please Print) \_\_\_\_\_ SUID \_\_\_\_\_

**Please note:** This form must be completed and returned to Advising and Academic Support. Petitions will only be reviewed up to 1 (one) month prior to the Health Professions Advisory Committee Meeting.

I respectfully petition to be reviewed for Committee Sponsorship by the Health Professions Advisory Committee, and that I be considered for a Committee ranking and letter to support my professional and/or graduate school application.

I am requesting an exception because (select all that apply):

- I did not submit my Intent to Apply by the deadline.
- I did not submit my request for three Letters of Recommendation (at least two by science faculty and one by a faculty member within one's major department) by the last day of final exams of the Fall semester.

I believe this petition should be approved for the following reasons:

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Signature \_\_\_\_\_ Date \_\_\_\_\_

*Please note that if the Committee does not receive the necessary information it needs to evaluate your credentials, sponsorship will not be possible. Also, your letter packet may be delayed and your Committee letter will be written without a letter interview.*

Office Use Only    Approved    Denied    Student Notified Via Email   Date \_\_\_\_\_