PURPOSE
Per RIT policy, a student may participate in Commencement when the degree audit process indicates that the student will complete all degree requirements prior to the beginning of the following fall term. This Petition to Participate in Commencement form is used in cases where a student does not meet these conditions. Petitions will be evaluated by the student’s home department (or departments for students with multiple majors) and the Dean’s Office.

ELIGIBLE STUDENTS
This form is for use by undergraduate students only. Graduate students must follow COS policy for Commencement participation.

CONDITIONS FOR PETITION APPROVAL
For this Petition to Participate in Commencement to be granted, the student must:

1) Be able to document that in fall term he/she has either 1 co-op or a maximum of 18 semester credit hours remaining to meet all degree requirements. This documentation must include a graduation audit, which may be obtained by filing an Application for Graduation with the Office of Student Services.

2) Identify on this petition how and when the remaining requirements are to be completed. This needs to include verification that any needed courses are offered in the terms indicated, that any transfer courses are pre-approved and that co-ops have been arranged.

COMPLETION PLAN
All remaining requirements (include classes, projects, internships, co-ops, and portfolios) that will not be completed by the end of the term in which Commencement participation is requested must be accounted for on this form.

<table>
<thead>
<tr>
<th>REMAINING REQUIREMENT</th>
<th>SCH</th>
<th>COURSE NUMBER</th>
<th>INSTITUTION</th>
<th>TERM TO BE TAKEN</th>
</tr>
</thead>
<tbody>
<tr>
<td>Co-Op (Example)</td>
<td>0</td>
<td>0514-499</td>
<td>RIT</td>
<td>Summer term 2013</td>
</tr>
</tbody>
</table>

REQUIRED ATTACHMENTS
1) Application for Graduation & Completed Degree Audit
2) Copy of signed Pre-Approval form for transfer credit (if applicable)

Student Name (printed) ___________________________ UID________________________

Student Signature ___________________________ Date________________

Dept. Chair Signature ___________________________ Date________________

The Department Chair Signature is mandatory prior to submitting this petition to the Dean’s Office.

Approved _____ Disapproved ______

Dean of the College of Science

Signature ___________________________ Date ______