

**PETITION TO TAKE COURSES AT ANOTHER INSTITUTION
FOR WATSON SCHOOL UNDERGRADUATES, BINGHAMTON UNIVERSITY**

**BINGHAMTON
UNIVERSITY**
STATE UNIVERSITY OF NEW YORK

Last name _____ First name _____ MI _____

Student's B-number _____ Date of birth _____ Major _____

Local/campus address _____ Home/permanent address _____
and e-mail _____

Local phone _____ Home phone _____

NOTES:

1. *Watson School students must petition all courses they intend to complete at other institutions.*
2. *Fill out all information requested. Provide a catalog description for each course. ▲▲▲*
3. *Take the completed petition to a) your department chairperson or faculty advisor for his/her signature. Department signature is NOT needed for N, P, H, A, G or Body/Wellness — only needed for Math, Science, CS and Engineering; and to b) the Watson School Advising Office, LSG-552, for signature and distribution.*
4. *After you complete the course, have an official transcript sent to the Admissions Office, Binghamton University, PO Box 6000, Binghamton, NY 13902-6001.*

Institution	Course number	Title	Sem. hrs.	Requirement to be satisfied (course equivalency)	Expected dates of attendance (semester/year)	Approval signature of dept. chairperson or faculty advisor

Watson Advising Approval: _____ Date Processed: _____

Comments: