

Dance Department Student Petition



The Department of Dance at the
University of Illinois
College of Fine & Applied Arts

907 ½ W. Nevada
Urbana, IL 61801 (MC-039)
Phone: (217)-333-1010 Fax: (217)-333-3000

Date of Petition: ____/____/____

Student Name: _____ **UIN:** _____

Local Address: _____

City: _____ **State:** _____ **Zip:** _____

Phone number: (____) _____ **Email address:** _____

Instructions for the Student

- 1) Write concisely, accurately, and legibly using ink.
- 2) Once completed, return this petition to your advisor.
- 3) You will receive an email notification when a decision is made on your petition.

To the Department of Dance, I request to:

Reasons or necessary remarks:

Advisor/Unit Recommendation

I recommend approval of this petition. I do not recommend approval of this petition.

Advisor Comments:

Advisor Name (print): _____

Advisor Signature: _____ **Date:** ____/____/____

dance at illinois