



Ben and Maytee Fisch College of Pharmacy
Professional and Academic Standards Committee (PASC)

College of Pharmacy
Professional and Academic Affairs Committee Petition

Student's Full Name: _____ Student ID #: _____

Academic Class: P1 P2 P3 P4

Preferred Mailing Address: _____
(City) (State) (Zip)

Preferred Phone Number (+area code): _____

Patriot Email Address: _____

Do you plan to present your case in person? (Circle One) YES or NO

Year you entered the College of Pharmacy: _____ Expected graduation date: _____

Please state category of your petition

- Honor Code Violation (e.g., HIPAA, exam violation, professionalism) ☐
- Change in Registration (e.g., Retroactive Withdrawal, Grade Forgiveness) ☐
- Academic Probation ☐
- Academic Dismissal ☐

STATE THE BASIS FOR YOUR PETITION AND SUBMIT IT ALONG WITH DOCUMENTATION AS NEEDED. (Note: This is a formal document that goes into your permanent record. Experience shows a well written petition is better received than a poorly written petition by the Committee. Please consult with your faculty advisor regarding your situation and write the petition with the professionalism and writing skills that reflect the seriousness of the situation).

• Current GPA in required pharmacy courses: _____

• Have you ever been on probation or dismissed from the College of Pharmacy? Yes ☐
No ☐

*Faculty Advisor's Name: _____

It is strongly suggested that you meet with your faculty advisor and discuss your situation before submitting your petition. Your faculty advisor will be permitted to attend and participate in the meeting. Your faculty advisor also will be able to serve as counsel during the meeting if necessary.

Student's Signature: _____ Date: _____

PLEASE SUBMIT THIS FORM TO THE OFFICE FOR ACADEMIC AFFAIRS

FAX: 903-565-5598
(ATTN: Dr. Fadi M. Alkhateeb)

Approved April 24, 2015