

International School

MULTIPLE PETITION FORM

To be completed by student:

Student's Name: _____ U. of Haifa ID Number: _____

E-mail Address: _____ Date: _____

Check only one statement below.

A separate form must be completed for each course and/or action requested.

_____ I would like to leave the University of Haifa early on the following date: _____.
I understand that it is my responsibility to arrange for a proctor from my home university to give me my exams within one week of returning to my home country, and that I must provide the International School with the proctor's contact information prior to my departure. **THIS FORM, SIGNED BY ALL LECTURERS (ON THE NEXT PAGE), MUST BE RETURNED TO THE INTERNATIONAL SCHOOL OFFICE WITHIN TWO WEEKS OF THE START OF THE SEMESTER. NON-COMPLIANCE MAY RESULT IN THE EARLY DEPARTURE NOT BEING APPROVED.**

_____ I would like to begin the upcoming semester late on the following date: _____.

_____ I would like to appeal my grade on _____ final exam, or _____ final paper in the following course: _____ (name of course)
_____ (name of faculty member).

The reasons for this are stated below.

I understand that the appeal process may result in my exam/paper receiving a lower grade.

I understand that the decision on the appeal is final.

Follow-up appeals will not be allowed.

**THIS FORM MUST BE RECEIVED BY THE INTERNATIONAL SCHOOL OFFICE
NO LATER THAN TWO WEEKS FROM STUDENT'S RECEIPT OF FINAL PAPER.**

_____ Other (please explain below)

Provide reasons and details below for above requested petition and affix supporting documentation if necessary:

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I hereby certify that the above information is correct and I petition for the action specified above. It is my responsibility to obtain all required signatures. I understand that this petition will not be considered until it is complete, and the official date of the petition will be the date of the Academic Head's signature.

Student Signature: _____ Date: _____

To be completed by all faculty members in case of early departure from program:

I agree to the above requested change to the status of this student in my course.

Lecturer's signature: _____ Date: _____

Lecturer's signature: _____ Date: _____

Lecturer's signature: _____ Date: _____

Lecturer's signature: _____ Date: _____

Lecturer's signature: _____ Date: _____

Lecturer's signature: _____ Date: _____

To be completed by instructor in the case of grade appeal:

The appeal was not accepted. _____ The appeal was accepted. _____

New grade exam/paper: _____ New final course grade: _____

Instructor signature: _____ Date: _____

To be completed by administration (for all circumstances except Appeal):

Action Taken:

Academic Advisor's Signature: _____ Date: _____