## Name: \_\_\_\_\_\_ Phone: \_\_\_\_\_ Email Address: Major: \_\_\_\_\_

Concentration:

I am requesting that my psychology program be evaluated using requirements listed in the 2003-2004 CSUS catalog. I understand that all previous petitions for "automatic" substitutions for psychology requirements will become void as of this date. Petitions for prerequisites to the program and course substitutions involving other colleges and universities will remain in force.

Minor:

Signature	Date
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This request must be submitted to the Psychology Department <u>before</u> applying for graduation. One copy will be placed in the student's academic advising file and the other will be sent to Admissions and Records.