



**UNIVERSITY OF NORTH DAKOTA
HISTOTECHNICIAN PROGRAM
PETITION FORM**

Student Name: _____ Student ID: _____
Date of Submission: _____ Student Advisor: _____
Telephone Number: _____ E-mail _____

What is the MLS Professional and Academic Standards Committee (PASC) decision that you are petitioning? Select one of the following options below:

- Placed on academic probation in the HT program
- Dismissal from the HT program

What was the date of MLS PASC decision that you are petitioning? *(Note: petition must be filed within 14 days of decision date.)*

Why are you petitioning the PASC decision?
I do not believe HT program policy has been followed in accordance with the HT Student Handbook.
I have additional information to share beyond what was originally reviewed by the PASC.

Based on your selection from the previous question, specifically explain why you feel HT program policy was not be followed and/or share additional information beyond what was originally reviewed by the PASC.

In addition to completing this form, I would like to speak to the PASC directly to present my petition. If you select yes, you will be contacted by an MLS PASC representative to coordinate a meeting time.
Yes No

Student Signature

Date