



**UNIVERSITY OF NORTH DAKOTA  
MEDICAL LABORATORY SCIENCE PROFESSIONAL PROGRAM  
PETITION FORM**

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Student Name: \_\_\_\_\_ Student ID: \_\_\_\_\_  
Date of Submission: \_\_\_\_\_ Student Advisor: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_ E-mail \_\_\_\_\_  
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**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 MLS professional program
- Dismissal from the MLS professional 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 MLS program policy has been followed in accordance with the MLS Undergraduate 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 MLS 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**