

**The University of Texas at Tyler**  
**GRADUATE NURSING PETITION FOR PROGRESSION**

Send to: [nursing-graduate@uttyler.edu](mailto:nursing-graduate@uttyler.edu)

Name: \_\_\_\_\_

Student ID: \_\_\_\_\_

Major: \_\_\_\_\_

Semester/Year: \_\_\_\_\_

Primary Phone Number: \_\_\_\_\_

Alternate Phone Number: \_\_\_\_\_

- I. Complete Section A with the following details:
  - a. Brief explanation of situation.
  - b. Explanation of why you should be considered for continuation.
  - c. List specific changes you will make to ensure future success in the program.
- II. The decision of the Admissions Progression Committee and Associate Dean is final.
- III. Petition must be received within ten working days of official drop date. The Admissions Progression Committee will respond within ten working days of receiving petition for progression.

**Section A:** *Details listed above*

**Student's Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Section B:**

**Recommendations from the Committee:** (May include support services, counseling, advisor meetings, or enrollment restrictions.)

Progress with no Restrictions       Progress with Restrictions       Not allowed to progress

Date of Committee Review: \_\_\_\_\_

For Which Semester/Year: \_\_\_\_\_

I agree       I Disagree      with the Admissions Progression Committee decision.

Associate Dean Signature: \_\_\_\_\_

Date: \_\_\_\_\_