INTERVIEWING OFFICER STATEMENT

Name:_____ UFID: _____

❑ I **WAIVE** the right to access the following information.

❑ I **DO NOT WAIVE** the right to access the following information.

Student Signature:_____

I have discussed this student's academic progress with him/her. We discussed his/her academic record, reasons for petitioning, extenuating circumstances and plans for future enrollment. Please see below for my comments on the merits of this petition and my recommendation.

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Based upon all available information, I

❑ Fully support this petition.
❑ Partially support this petition.
❑ Support this petition with reservation.
❑ Do not support this petition.

_____

Interviewing Officer's Signature Printed Name Date

You may either give this form to the student in a sealed envelope for delivery to the Office of the University Registrar or mail it directly to the Office of the University Registrar at Box 114000, 222 Criser Hall.