OFF-CAMPUS PETITION FORM
FINE ARTS & LECTURESHIP SERIES

To: FALS Committee
Lander University

Date:_____

From: Student Name _____ LU# _____

Phone _____email _____

Student signature: _____ **Official signature**_____

I request I be given credit for the following as an approved FALS event:

_____

_____

Date of your visit: _____

Please submit this completed form along with a ticket stub, program or other proof of attendance and a **one-page typewritten** description indicating how the event/exhibit/performance increased your understanding of cultural values.

This form and ALL accompanying materials should be submitted to the **drop box located in the University Post Office** (drop box is to the left as you walk in the door.) Petitions will be reviewed by the FALS committee on a monthly basis around the 15th of each month. The registrar's office will notify you if the petition has not been approved.

FALS COMMITTEE USE ONLY: DATE Received: _____

APPROVED ☐ **DENIED** ☐

Comments: _____

_____

FINAL APPROVAL **Date:_____**

SIGNATURE: FALS Committee Chair: _____