



Department of Sociology
Undergraduate Add Petition
SOC 198 Linking Statistics Education and Practice

Name: _____ Semester: _____ Year: _____

Address: _____ Phone Number: _____

City, State, Zip _____ Email: _____

Student ID: _____ Number of Units: [] 1 [] 2 [] 3

Class Level (Please Select One):

[] Freshman [] Sophomore [] Junior [] Senior

Description of Course Content:

Multiple horizontal lines for describing course content.

(Use reverse side if more space is required)

FACULTY SPONSOR'S SIGNATURE

DEPARTMENT CHAIR'S SIGNATURE

OFFICE USE ONLY

[] Class added: Initials _____ Date _____
[] Class not added: Initials _____ Date _____
Reason: _____

Units Enrolled: [] 1 [] 2 [] 3