Petition to Count a Course Toward the PPW Certificate

Please complete this form, attach examples, and submit your packet to the address above. We will confirm receipt and let you know our decision.

Name _________________________________ Phone ________________________________

E-mail _________________________________

College that offered the course ____________________________ Term/Year ________________

Course number and title ____________________________

Teacher ____________________________ Grade earned ____________________________

Brief course description (if possible, attach a photocopy of the actual course description)

_________________________________________________________________________________
_________________________________________________________________________________
_________________________________________________________________________________
_________________________________________________________________________________

Describe the writing you did for the course:

_________________________________________________________________________________
_________________________________________________________________________________
_________________________________________________________________________________
_________________________________________________________________________________

Attach photocopied examples of your work from the course. We prefer to see teacher's comments.