



# COURSE REPETITION REQUEST

Admissions and Records

Final course grade must be posted before request may be filed. Use a separate form for each course repetition request.

Last Name \_\_\_\_\_ First Name \_\_\_\_\_ MI \_\_\_\_\_ Student ID# \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_ Phone: ( ) \_\_\_\_\_ - \_\_\_\_\_

### REFER TO COLLEGE CATALOG FOR COURSE REPETITION POLICIES.

**Repeat Reasons:** Check one (1) box from list below:

- Substandard grade of D, F, NC, or NP
- Previous withdrawal from class
- Lapse of one (1) year since taking the course with an A, B, C, CR or P.
- Legally mandated training requirement as a condition of continued employment. **(Official legal documentation required.)**
- Grade of B, C, CR or P was a result of verified case of accident, illness or other extenuating circumstances beyond the student's control. **(Official legal documentation and explanation required.)**

**Enter course history below:**

Course Title	Semester and Year	Grade earned

I declare under penalty of perjury that all information on this form is true and correct.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### FOR DISTRICT USE ONLY

- Denied
- Approved     PETY     PE3T     EXEX     WEX     LMAN     SPAC

Reviewer Signature: \_\_\_\_\_ Date: \_\_\_\_\_