$\begin{array}{c} \text{Course Repeat Request Form} - 3^{rd} \text{ or subsequent attempt} \\ \text{PHYS and ASTR} \end{array}$

Student Name:								
Student Number:								
Course:								
Term and Grade 1st	attempt:							
Term and Grade 2 nd	attempt:							
Term and Grade 3 rd	attempt:							
Why are you seekin	g to take th	is course?						
What specific action	ns and strate	egies have you	used or will	you use to	o successful	ly compl	ete the course?	
Please note that app and your prospects: Approval for a 4 th a	for success	considering you	ur stated inte	ntions.	•	ır reason	for taking the cours	se
PHYS/ASTR Chair	's (or design	nate) approval:	Yes		No			
Dean (or designate)	approval:		Yes		No			

Instructions to the student: Once you have completed this form send it by email to phast_advising@uvic.ca
It will be considered. If approved the Department will forward it to the Associate Dean Academic Advising, who is the designate of the Dean of Science for these matters.