



**REQUEST TO REPEAT A COURSE**

Students are responsible for submitting this form by the deadline specified by the Department. Typically, this is 4:30pm two weeks prior to the final Add Date; however, the Department reserves the right to adjust this deadline as necessary.

Please note that these forms are term-sensitive; a new form must be submitted each term a course repeat is attempted.

Name: \_\_\_\_\_ Student Number: V0 \_\_\_\_\_

Course: \_\_\_\_\_ Term: \_\_\_\_\_

Term and grade from 1<sup>st</sup> attempt: \_\_\_\_\_

Term and grade from 2<sup>nd</sup> attempt: \_\_\_\_\_

Term and grade from 3<sup>rd</sup> attempt: \_\_\_\_\_

**What specific actions and strategies have you/will you use to successfully complete the course?**

Please note that your request will not be granted if this section is not completed.

Date submitted: \_\_\_\_\_

Please note that approval is not automatic and is based on judgements about your reason for taking the course and your prospects for success in considering your stated intentions. Approval for a 4<sup>th</sup> attempt is only considered in exceptional circumstances.

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**(Department Use Only)**

Undergraduate Advisor: \_\_\_\_\_ Date: \_\_\_\_\_ Decision: \_\_\_\_\_

Reason for decision:

Dean (or designate): \_\_\_\_\_ Date: \_\_\_\_\_ Decision: \_\_\_\_\_