



COURSE REPETITION REQUEST

Submit this form with the necessary documentation* attached to the Vice President of Student Services or Administrative Designee for approval.

Student Information

Name: _____ **Student ID:** _____
Last First M.I.

Address: _____
Address City State Zip Code

Phone: _____ **Email:** _____

Term for repeated course: Fall Spring Summer **Year:** _____ **College:** _____

Department & Course: _____ **Title:** _____ **Class Number:** _____

A student earning a satisfactory grade may not enroll in the same course unless one of the following exceptions applies:

Legally Mandated Training - Repeat a course in which the student received a satisfactory grade when repetition is necessary for the student to meet a legally mandated training requirement as a condition of continued paid or volunteer employment.
 *Documentation required: letter from employer and unofficial transcript. (The grade will be included in the GPA calculation).
 **[Title 5, section 55040(b)(8)]

Significance Lapse of Time - Repeat a course in which the student received a satisfactory grade if the district has determined that a significant lapse of time (36 months) has occurred since the last time the student took the course **and** the course is required by the District (PCCD) as a recency prerequisite(see section 55003) **or** by another institution of higher education to which the student seeks to transfer and that insitution requires the student to have taken the course more recently than the student's last enrollment. *Documentation required: unofficial transcript.** [Title 5, section 55040(b)(3), 55043]

Extenuating Circumstances - Repeat a course due to circumstances beyond the student's control, such as accidents or illnesses.*Documentation required: medical documentation and unofficial transcript.(The highest grade shall be included for purposes of calculating the GPA and unit totals).** [Title 5, 55040(b)(5), 55045]

Significant Change in Industry or Licensure Standards - Repeat a course as a result of significant change in industry or licensure standards that such a repetition of the course is necessary for the student's employment or licensure.*Documentation required: letter from employer and unofficial transcript. (The grades shall be included for the purposes of GPA calculation).
 ** [Title 5, section 55040(b)(9)]

Note:When repeating a transfer course, PCCD procedures may not reflect the procedures of four-year colleges/universities.

X _____
Student Signature *Date*

Vice President of Student Services or Administrative Designee Use Only

Approved Denied **Reason:** _____

Student notified by: _____ Phone Email In-Person
Name

X _____ **X** _____
Vice President or Administrative Designee Name (print) *Signature – Vice President or Administrative Designee* *Date*

Note: After informing the student of the decision, please return this form to the Admissions and Records Office. If the request is approved, Admissions and Records will register the student for the course listed. This form will be retained by the District Admissions and Records and all necessary transcript actions will be completed once grades have been posted at the end of the term.

Admissions and Records Use Only

Registration processed by: _____ Grade flagged as repeat **Date:** _____