

REPEATED COURSE RECORDS UPDATE REQUEST

STUDENT NAME _____

SS # _____

TERM	Original Class		
	COURSE	NUMBER	GRADE

TERM	Repeated Class		
	COURSE	NUMBER	GRADE

STUDENT SIGNATURE _____

***Please complete form and route to Registrar's Office**

***Note courses with grades of "N", "W", or "I" will not be designated as repeats**

***Note some courses may be repeated for credit and will not be noted as repeats**