



<i>Office Use Only</i> Employee Name: _____ Received Date: _____
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### Course Repeat Form

Submit the completed form to the Enrollment Services Office in Building 7 (North entrance) or email to [EnrollmentServices@tacomacc.edu](mailto:EnrollmentServices@tacomacc.edu).

**Important information regarding repeats:**

- A student may take a course for a total of three attempts. Attempts are defined as earning a grade in a course or withdrawing from the course on or after the 11<sup>th</sup> instructional day (receiving a W grade).
- Academic programs may have specific repeat policies.
- Repeating previously passed courses may not be eligible for Financial Aid or VA funding. Please check with appropriate offices and funding sources on applicable policies.

Student ID:	Last Name:	First Name:
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Course name	Lower grade	Quarter/Year	Course name	Higher grade	Quarter/Year

**Student Verification:**

I understand that repeated classes will remain on my transcript, but the code “Repeat – Excluded” will be added to the lower grade. GPA calculations will not include the “Repeat – Excluded” grade or the credit earned for the repeated course.

Student’s Signature: \_\_\_\_\_ Date: \_\_\_\_\_