

# REPEATED COURSE FORM PRINT ALL INFORMATION

(\* REQUIRED) PLEASE PRINT ALL INFORMATION. Incomplete forms cannot be processed.

\*ID #: B

\* Name: \_\_\_\_\_

|                                                                                                                                                                                                              |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p><b>* Classification (check one):</b></p> <p><input type="checkbox"/> freshman</p> <p><input type="checkbox"/> sophomore</p> <p><input type="checkbox"/> junior</p> <p><input type="checkbox"/> senior</p> |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

\*Address: \_\_\_\_\_

Street Apt #

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City State Zip

1. A student may repeat for grade forgiveness a **maximum of four courses** in which a "D", "F", or "WF" grade is earned. Both grades will remain on the permanent record, but only the second grade will be used to calculate the grade point average.
2. This option may be used **only once** for each course in with a "D", "F", or "WF" was received.
3. A student **must** accept, for purposes of grade forgiveness, the first four courses repeated **chronologically**.
4. No course may be repeated for the purpose of grade forgiveness **after a course for which it is a prerequisite has been passed**.
5. No course may be repeated by transfer credit.
6. The grade forgiveness provision is applicable only to students who **do not** possess a baccalaureate degree.

| * Department | * Course Number | * Semester Taken | * Semester Repeated | OFFICE USE ONLY   |
|--------------|-----------------|------------------|---------------------|-------------------|
|              |                 |                  |                     | Approved / Denied |
|              |                 |                  |                     | Approved / Denied |
|              |                 |                  |                     | Approved / Denied |
|              |                 |                  |                     | Approved / Denied |

**Processing will take approximately 15 working days AFTER the end of the term in which the course is repeated.**

\_\_\_\_\_  
\* Signature \* Date

**View updated academic totals through myUCA.**

|                             |
|-----------------------------|
| <b>FOR OFFICE USE ONLY:</b> |
| Comments:                   |
| By: _____ Date: _____       |
| 04262010                    |

|                                       |
|---------------------------------------|
| <i>Return to:</i>                     |
| <i>Office of the Registrar</i>        |
| <i>McCastlain Hall, Room 112</i>      |
| <i>University of Central Arkansas</i> |
| <i>Conway, Arkansas 72035-0001</i>    |