## PETITION for ACADEMIC RENEWAL WITH REPETITION

NAME:	STUDENT ID:	
ADDRESS:	PHONE:	
CITY STATE ZIP:	FMAIL:	

## **REPLACEMENT CONSIDERED FOR REPEATS OF D, F, or NC/NP GRADES ONLY**

Replacement courses taken at other institutions **require an official transcript** to be sent to Admissions and Records. A copy of this petition will be sent to you once a determination has been made and action taken. Replacement classes must be identical in scope and in number of units as the class that earned the D, F, NC or NP at Fresno City College. This petition is for classes at **Fresno City College only.** Please contact the campus that sponsored the class if the class was taken from Reedley College, Clovis Community College (formerly Willow International), or Madera Community College/Oakhurst Center.

FCC COURSE:	SEMESTER:	Please replace the former grade with this course from:	
GRADE:	UNITS:		
Office Use On	ly	THEIR COURSE:	SEMESTER:
Replacement Approved?	Disapproved?	GRADE:	UNITS:
Office Remarks:			
FCC COURSE:	SEMESTER:	Please replace the former grad	de with this course from:
GRADE:	UNITS:		
Office Use On	ly	THEIR COURSE:	SEMESTER:
Replacement Approved?	Disapproved?	GRADE:	UNITS:
Office Remarks:			
I understand that this policy at SCCCD does not guarantee comparable action by other colleges or universities.			
STUDENT SIGNATURE:	DENT SIGNATURE: DATE:		
↓FOR OFFICE USE ONLY↓			
Date Received:	Received by:	Official Transcripts Attach	ed: Yes No
ASC Designee Remarks:			
Academic Standards Committee Designee: Date:			
Date Processed:	By:	Copy to Student:	Ву: