



FRESNO CITY COLLEGE
PETITION TO REPEAT A COURSE

NAME: _____

REC'D DATE: _____

PHONE #: _____

REC'D BY: _____

EMAIL: _____

STUDENT ID: _____

I AM PETITIONING TO REPEAT:

COURSE to be Repeated (e.g., PSY-2)

TERM Requested (e.g., 2018 Fall)

_____ Fall _____ Spring _____ Summer

Counselor Intervention Required Due to:

3rd Attempt – Counselor Approval Only: Counseling worksheet required (prior attempt earned NP, NC, D, F, W)

4th or greater Attempt* OR Repeat of successfully completed class**

STUDENT MUST SELECT ONE OF THE FOLLOWING JUSTIFICATIONS FOR REPEAT:

Extenuating Circumstances* Previous NP, NC, D, F, W received was due to verifiable circumstances (§55045). (4th or greater attempt). **Verifiable Third Party documentation of accident, illness, etc. required.**

Legally Mandated Training** Required as a condition of continued paid or volunteer employment (§55041(b)). **Must provide documentation verifying required training.**

Significant Lapse of Time** A significant period of time has elapsed since course was successfully completed (§55043) (3 yrs minimum). **Explanation of and 3rd party documentation for repeating course is required. (Example: Recency requirement of a specific program or change in industry related technology).**

PLEASE NOTE: The grade received by repeating the course under any of these circumstances may not be counted in your GPA. These 3 options require a Comprehensive Student Education Plan (SEP) be attached.

_____ Student's Signature

_____ Date

FOR OFFICE USE ONLY

Previous Petitions: YES NO Term: _____ Verified by: _____ STPE Code: _____

List ALL attempts with grades and/or symbols: **Fourth attempts and previous successful completion requires Comprehensive SEP and documentation to be attached.**

Has Add Slip from Instructor: SECTION #: _____ AUTH CODE: _____ XADD?

Sent to Counseling: YES NO Date: _____ Comprehensive SEP Required: YES NO

COMMENTS: _____

Process Date: _____ By: _____ STPE Code: _____ Copy to Student Date: _____ By: _____

To ASC: Date: _____ Academic Standards Committee Designee: _____ Date: _____

NAME: _____
First MI Last

STUDENT ID: _____

1. Explain why you have been unable to complete college work successfully. Present all relevant information. Please attach your evidence, e.g., copies of court records, letters from employers, other third party evidence that verifies your situation.

Empty response box for question 1.

2. Explain how you will be successful in college in the future. What has changed that will enable that success?

Empty response box for question 2.