

**PETITION for ACADEMIC RENEWAL
WITHOUT REPETITION**
NAME: _____

STUDENT ID: _____

ADDRESS: _____

PHONE: _____

CITY, STATE, ZIP: _____

EMAIL: _____

*Be sure to read the eligibility requirements on the back of this form and sign it to acknowledge you meet them.
A copy of this petition will be mailed to you when the action has been taken.*

Current Major: _____

Applied for Graduation: Yes _____ No _____

COURSE: _____ **SEMESTER:** _____

COURSE: _____ **SEMESTER:** _____

GRADE: _____ **UNITS:** _____

GRADE: _____ **UNITS:** _____

Office Use Only

Is this a required course? Yes _____ No _____

Is this a required course? Yes _____ No _____

Is course used for a degree? Yes _____ No _____

Is course used for a degree? Yes _____ No _____

Approved? _____ Disapproved? _____

Approved? _____ Disapproved? _____

Remarks: _____

Remarks: _____

COURSE: _____ **SEMESTER:** _____

COURSE: _____ **SEMESTER:** _____

GRADE: _____ **UNITS:** _____

GRADE: _____ **UNITS:** _____

Office Use Only

Is this a required course? Yes _____ No _____

Is this a required course? Yes _____ No _____

Is course used for a degree? Yes _____ No _____

Is course used for a degree? Yes _____ No _____

Approved? _____ Disapproved? _____

Approved? _____ Disapproved? _____

Remarks: _____

Remarks: _____

I understand that this policy at SCCCD does not guarantee comparable action by other colleges or universities.

STUDENT SIGNATURE: _____ **DATE:** _____

↓ FOR OFFICE USE ONLY ↓

Type Y or N: Enrolled _____ Major Declared _____ Program Completed _____ GPA 3.0 _____ GPA 2.5 _____

Academic Standards Committee Designee _____ Date: _____

Date Processed: _____ By: _____ Copy to Student: _____ By: _____

ACADEMIC RENEWAL of SUBSTANDARD GRADES without Repetition

A student must meet **ALL FIVE** of the following criteria, as set forth in the FCC college catalog.

1. Yes ___ No ___ I am pursuing an Associate degree or certificate within the State Center Community College District (SCCCD).
2. Yes ___ No ___ I am enrolled and attending the current term within SCCC.
3. Yes ___ No ___ At least two years has lapsed since the substandard grade was recorded.
4. There are three different ways you can meet the GPA requirement. Please check the one that applies to you.

___ A degree or certificate from within the SCCC is already posted to my transcript.
___ My most recent 12 units within the SCCC were completed with a GPA of 3.0 or greater.
___ My most recent 24 units within the SCCC were completed with a GPA of 2.5 or better.
5. For students who change majors while attending FCC, we will alleviate courses from the old major under the following conditions:
 - a) All of the conditions stated in AR 4240 must be met.
 - b) The student should have completed at least half of the new major's core courses within the SCCC. Only major-specific courses count to this requirement. General Education courses related to the major do not count toward this requirement.
 - c) The student's four most recent semesters within the SCCC must have an average GPA of 2.00 or higher.

If you are unsure of whether you meet any of the criteria above, you should meet with a counselor to assist you before completing the petition.

***** NOTE *****

- ✦ Substandard work (i.e., grades of D, F, NC or NP) not reflective of the student's present scholastic level of performance, may be alleviated without repetition only if; 1) the course(s) are no longer appropriate for the student's present educational objectives or, 2) the course(s) are no longer available for repetition.
- ✦ The number of units to be alleviated CANNOT exceed the number of units successfully completed since the substandard work was recorded.
- ✦ Approved alleviations result in the grade points no longer being included in the GPA. The grade symbol remains visible on the transcript but the points will be bracketed to show they are no longer applied.

I am familiar with or have met with a counselor regarding the above criteria and wish to apply for course alleviation of substandard grades without repetition.

STUDENT SIGNATURE: _____ **DATE:** _____