

*Office Use Only*

Employee Name:

Received Date:

**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 11th 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.

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| --- | --- | --- |
| Student ID: | Last Name: | First Name: |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 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:

TAM 12/05/2023