



**EXCEPTION TO ACADEMIC POLICY FOR
REPETITION OF COURSES
Repeat a Course More Than Twice,
Exceed Unit Limits**

Office of Admissions and Records (WH 290)

DATE RECEIVED IN A & R

PLACE DATE STAMP HERE

An exception to Academic Policy for Repeating Courses will be considered only in cases of demonstrated need (usually to avoid undue delay in graduation) and documented circumstances which support the potential for the student's future academic success.

An undergraduate student may not enroll in or receive unit credit for a course for which the student has already received a grade of A, B, C, or CR, including a university-level course taken at a high school or another college or university.

Last Name	First Name	M	Student ID Number	Major
Expected Date of Graduation	Overall GPA	CSUDH GPA	Email	Term

DIRECTIONS:

- 1 -Submit a statement explaining why you want to repeat the course, including changes in academic behavior.
- 2- Submit an academic plan designed with your advisor that lists the remaining courses needed to graduate and how many total courses you will need to repeat before graduation.
- 3- Obtain approval signatures from your major advisor (undergraduate students) or your program coordinator (graduate students), the Department Chair or Dean, and the Associate Dean.
- 4 -Submit this completed form along with your statement and plan to Admissions and Records, WH-C290.

- Exception to Undergraduate Limit: Repetition of Courses:** An undergraduate student with extenuating circumstances that needs to repeat a course but has already reached the 16 unit limit. Grades earned from the course will be averaged up to 28 units.
- Repeat a Course More Than Twice:** An undergraduate or graduate student with extenuating circumstances may request to repeat a course more than twice if the student fails to achieve an **A, B, C, or CR** in the second repeat attempt. In such cases, the additional repeat will not result in the forgiveness of a prior grade. All attempts will be used in GPA calculation.

Requested Course(s) to be Added:

CRN	Dept and Course #	Section #	Term	Units

Check your Toro email for the status of your Exception Form. Please allow two business days for processing.

Student Signature _____ **Date** _____

DEPARTMENT APPROVALS

Major Advisor (Undergraduate) _____	Date _____	<input type="checkbox"/> Approve	<input type="checkbox"/> Deny
Program Coordinator (Graduate) _____	Date _____	<input type="checkbox"/> Approve	<input type="checkbox"/> Deny
Department Chair / Dean _____	Date _____	<input type="checkbox"/> Approve	<input type="checkbox"/> Deny
Associate Dean _____	Date _____	<input type="checkbox"/> Approve	<input type="checkbox"/> Deny