

Third Attempt Request Form

Saint Paul College's repeat course policy limits students to two attempts at taking the same course. Students seeking permission to attempt any course for a third time must submit the request form. The deadline for submission is the Friday before the first week of classes. The request will be processed within 3 business days. Approval is not always granted and an appointment with your Pathway Advisor may be required, which could extend the processing time. Decisions/updates regarding your request will be sent via email to the email address documented on your request. If granted, approval is for one semester only. If you do not register for the approved course, you must submit a new Third Attempt Request Form for a future semester. Requests for multiple third attempts in a single semester will not be considered. Requests for fourth attempts will not be considered.

**Course withdrawals ("W" on transcript) count as an attempt.*

Name:				ID #:			
Program / Major:				Email Address:			
Course ID (e.g. 000123)	Subject (e.g. ENGL)	Course # (e.g. 1711)	Section # (e.g. 01)	Term (circle one)			Year
				Fall	Spring	Summer	
You must meet the following criteria to be considered for a third attempt of a course:							
<input type="checkbox"/> I am requesting permission to take a course that is required for my declared program.							
<input type="checkbox"/> I have attempted this course at Saint Paul College only twice.							

Please answer the following questions: (Use additional paper if necessary)

1. What factors prevented you from successfully completing this course during your previous attempt?

2. How will you ensure your success in this course? What will you do differently?

3. What is your alternative academic plan in the event you are unable to repeat the course?

4. Is there any additional information you would like to have considered for this request?

Return this form to the Advising and Counseling Office when complete (Room 1340).

Incomplete forms will not be processed.

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<p>DECISION</p> <p>_____ Approved</p> <p>_____ Approved with conditions</p> <p>_____ Denied</p>	<p>ISRS / ARSA UPDATES</p> <p><input type="checkbox"/> Demo <input type="checkbox"/> Permission (if granted)</p> <p>Contact made with Student:</p> <p><input type="checkbox"/> Phone <input type="checkbox"/> Email <input type="checkbox"/> In-Person</p>
Signature (Pathway Advisor): _____	Date: _____
Notes: _____ _____ _____ _____	

UPDATED 1/18/18 ED/CR