



Feather River College

ADMISSIONS & RECORDS OFFICE

570 Golden Eagle Ave., Quincy, CA 95971

(530) 283-0202 – Fax (530) 283-9961

Petition to Repeat a Course

Date _____

FRC ID # or SSI #: _____

Grid for Last Name

Last Name

First

Initial

Address _____

PO Box/Street Address

City

State

Zip

Date of Birth - - _____

Phone () - _____

I hereby petition to repeat _____ in the _____ CRN # _____.

Course Number & Name

Semester & Year

I originally took this course during the _____.

Semester & Year(s)

Reason for repeat:

- Job Requirement (explain):
Extenuating Circumstances (explain):
Other (explain):

Both the original and subsequent grades will remain a part of the Permanent Record but may or may not be counted in units completed or GPA (Grade Point Average). Feather River College can provide no assurance that repeated courses will be treated in a like manner by other institutions.

Signature _____

RECORDS OFFICE USE ONLY

(Attach grade screen for review by the Dean)

Former Grade _____ Units _____ GPA _____ Applies to Cumulative: Yes No

Count in Apportionment Yes No

DEAN OF INSTRUCTION (Only required with a satisfactory grade, C or above)

Approved

Denied

Signature _____

Processed By _____

Date _____

Copy to Registrar

SFASRPO