

Override to Repeat a Course

Student Name:				St	udent ID#: 80	
Last First			M.	м. Major/Minor:		
Use this form to request permission to repeat a course. Indicate which semester(s) you plan to take the repeated course by checking the appropriate box. Submit completed form to the main department office of your major/minor. I would like to repeat the following course(s):						
1	[DEPT & COURS	E NUMBER]		□ Fall □ Spring		20
		E NUMBER] ng the course:		☐ Fall ☐ Spring		20
	[DEPT & COURS	•	,	□ Fall □ Spring	□ Summer I □ Summer II	20
 Your signature below certifies that all the information given on this form is true. You will be contacted via 49er Express email if this request is approved. Please be aware of the following: Once the override has been entered, it is your responsibility to register for the class. A repeat override does not guarantee a seat in the class; therefore it is very important for you to register immediately. You will not earn additional credit for repeated coursework. If you wish to repeat this course with grade replacement, an online Grade Replacement Request must be submitted. 						
Student Signatur	re:				Date:	
Approved:						