Undergraduate Approval to Repeat a Course

Name: ___________________________ UF ID#: ___________________ Email: ___________________________@ufl.edu

Instructions:
- Complete all sections below and obtain signatures in the proper order listed.
- Acquire a signature from your major department AND from a representative from the College offering your major.

1) Repeat Course Prefix/Code: ___________________________
   Term(s) Taken/Grade(s) Received: ___________________________
   e.g. Spring 2017/C+; if multiple terms – e.g. Spring 2016/C and Fall 2017/C+

2) Personal Statement: Explain your reason(s) for repeating a course where a C or higher was earned in a previous attempt.
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________

3) Department of Student’s Major—Approval of repeated course and authorized signature
   Approved: ______ Denied: ______ Date: ________________
   Comments/Conditions: ______________________________________
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________
   Signature of Department Undergraduate Coordinator or Authorized Representative
   __________________________________________________________
   Printed Name

4) College of the Student’s Major – Approval of repeated course and authorized signature:
   Approved: ______ Denied: ______ Date: ________________
   Comments/Conditions: ______________________________________
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________
   Signature of Student Date

5) Student Acknowledgment
   I acknowledge that all grades earned for a repeat course taken at UF will be calculated in my UF GPA. The best attempt will apply toward the degree requirement. All credits will count towards excess credit hours.
   Initial
   I acknowledge that if I had previous AP/IB/AICE credit for this course and then repeat this course through UF, I will receive a grade for the UF course and no credit for the prior work.
   Initial
   I acknowledge that if this is my third attempt (or more) of this course, additional repeat course surcharges will apply.
   Initial

Return completed form to: Office of the University Registrar, PO Box 114000, 222 Criser Hall, Gainesville, FL 32611-4000, 352-392-1374.
Please allow two business days for processing.