



Repeated Course Notification

Student Name (Please Print)

LSC ID #

Student Signature

Date

Please amend my academic record to reflect that I have repeated the following course. I understand that this will result in an adjustment of my grade point average, but the initial grade will not be removed from my transcript.

I completed this course:

Semester Taken	Course/Number/Section	Title	Grade
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I repeated this course:

Semester Taken	Course/Number/Section	Title	Grade
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FOR OFFICE USE ONLY: DATE PROCESSED: _____

F-0128B

ARC-020
06/08



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