Cleveland State University

Division of Enrollment Services

Course Repeat Form

Use this form ONLY if the course is being repeated at CSU and one of the following applies: (check one)

☐ **The course was originally taken during Quarters, OR**

☐ **Does not have the same course title, course abbreviation, or catalog number, OR**

☐ **Credit hour changes resulting from the Fall semester 2014 four-to-three credit hour conversion have impacted your total earned hours required for graduation. (Advisor approval required)**

STUDENT INFORMATION

Name:	CSU Student ID #:

Required Conditions and Results for Course Repeat:

➢ **Courses must be equivalent to a "D" or below, affect the grade point average, and have been earned or repeated.**
➢ *Courses in which a "C" or higher was earned are not repeatable.*
➢ **Courses may NOT be repeated more than twice.**
➢ **Courses that have an alternative repeat policy stated in their course description are excluded from the policy.**
➢ **Course repetitions must receive a letter grade that affects grade point average to apply.**
➢ **This policy is NOT retroactive to courses already repeated.**
➢ **Repeated courses and grades will remain recorded on the transcript but are not included in grade point average**
➢ **The letter grade earned in the most recent attempt will be included in the cumulative credit totals and grade point average.**
➢ **When related to the four-to-three conversion, credit hours from the previous attempt will be used for courses earning a grade of D, to support graduation requirements.**

Subject and Course Number (e.g. ENG 101)	Course Title		Original Grade Earned
Course Originally Taken Semester: _____ Year: _____ Credit Hours: _____		Course will be Repeated Semester: _____ Year: _____ Credit Hours: _____	

APPROVALS (Official Use Only):

Advisor Approval Signature (for four-to-three conversion related changes):	
Department:	Department Chair Approval and Extension:
Previous Course Information (e.g. ENG 101): IS EQUIVALENT TO:	Current Course Information (e.g. ENG 101):
Additional Comments:	

* Student Signature (required): _____**Date:** _____

Please return to Campus411 All-in-1 in BH 116

| Rev. 07/2019