



Repeat a Course: Undergraduate

Purpose: Used by Undergraduate students who have multiple failed attempts (F, U, UNC, UY or NC) of the same course and are unable to register for the course again via CheckMarq.

Student Instructions:

- You must seek permission with this form to repeat a failed course; you will know if you need this permission by the message you received when attempting to register for the course in CheckMarq.
- Complete one form for each course you are eligible to repeat.
- Complete Sections 1-3 of this form, using a computer.
 - a **handwritten form will not be accepted.**
 - an incomplete form will not be processed and returned to you for completion.
- Print the form using the 'Print Form' button.
- Sign the form in Section 4; a digital signature is **not** acceptable.
- Print an Academic Advisement-Graduation Checklist Report and attach it to the form. This report is found in CheckMarq under Academic Requirements.
- Submit the form and the Academic Advisement-Graduation Checklist Report via one of the methods listed at the bottom of this form.

NOTE: Students enrolled in the College of Engineering or the College of Nursing must submit this form to your College, who will deliver it for you.
- The Office of the Registrar will notify the student via Marquette email as to the approval or denial of the request. If approved the Office of the Registrar will register the student.

College of Engineering and College of Nursing Instructions:

- Approve or deny the request in Section 5

NOTE: as per federal regulations, this request may be approved only once, if the student has already passed the course. It may be approved for more than one request, if the student has not earned the minimum passing grade for the university. However, if your school repeat policy is more strict than the federal regulations, your policy may supersede the regulations.
- Scan the Repeat Course form and the Academic Advisement-Graduation Checklist Report to the Office of the Registrar via ImageNow.

Section 1: Student Information

Full Name
Last name, First name, Middle name _____

Email _____@marquette.edu MUID _____

Mailing Address
street, city, state, zip code _____

College _____ Major _____

Section 2: Course Information

Original course information

Subject Code (e.g. ENGL)	Course Number (e.g. 1001)	Section (e.g. 101)	Title	Term (e.g. Fall)	Year
_____	_____	_____	_____	_____	_____

I wish to repeat _____ during _____

Section (e.g. 101)	Term (e.g. Fall)	Year
_____	_____	_____

Section 3: Discussion, Lab or Quiz Information

I wish to repeat
check all that apply

<input type="checkbox"/> Discussion	<input type="checkbox"/> Lab	<input type="checkbox"/> Quiz
Discussion Number (e.g. 1001)	Section (e.g. 101)	Lab Number (e.g. 1001)
_____	_____	Section (e.g. 101)
_____	_____	Quiz Number (e.g. 1001)
_____	_____	Section (e.g. 101)

Section 4: Student Statement/Signature

I attest that all of the information above is true and correct. I also confirm my understanding of the [Repeat Course Policy](#) for undergraduate students that outlines how repeated course grades affect my GPA and academic record.

Signature of Student _____ Date _____

Section 5: College Approval/Denial

College of Engineering:	<input type="checkbox"/> Approved	<input type="checkbox"/> Denied	Rationale: _____	Signature: _____
College of Nursing:	<input type="checkbox"/> Approved	<input type="checkbox"/> Denied	Rationale: _____	Signature: _____