



STUDENT NAME	STUDENT ID	COURSE	TERM
EMAIL ADDRESS			

1st Attempt Term: \_\_\_\_\_ Grade Received: \_\_\_\_\_

2nd Attempt Term: \_\_\_\_\_ Grade Received: \_\_\_\_\_ Current UGPA: \_\_\_\_\_

**CRITERIA:**

Please describe why your previous attempts at this course were not successful on the personal statement form.

- Personal Statement attached.
- Academic Plan attached.
- Current UGPA is 60% or greater.

Acknowledgements:

- I understand that I will only be able to register in **three courses** while attempting this repeat limit.
- I must complete the course in the term which it is approved.
- It is my responsibility to register for the course. The Faculty of Engineering and Applied Science will not register on my behalf.
- The grade received on this attempt will replace all other grades that I have previously received for this course.
- If I am not successful during this attempt, I understand that the Faculty regulations on academic performance will apply. I will be required to discontinue (RTD), the minimum length of a faculty RTD is two consecutive terms. If the course is ENGL 100, I will be assessed a Must Withdraw of 2 years (MW).**

\_\_\_\_\_

*Signature*

\_\_\_\_\_

*Date*

**OFFICE USE ONLY – PLEASE DO NOT WRITE IN THE BOX**

**DECISION:**

Permission to repeat the above course has been **granted / denied** for the \_\_\_\_\_ term.

Comments:

\_\_\_\_\_

Date: \_\_\_\_\_

Associate Dean Academic

**NOTIFICATION:**     *Override entered and letter sent:* \_\_\_\_\_ *Date:* \_\_\_\_\_



STUDENT NAME	STUDENT ID	EMAIL	Program



## Academic Plan

STUDENT NAME	STUDENT ID	EMAIL	Program

DISCLAIMER			
<p>By submitting this academic plan, I acknowledge that any time conflict and/or missing pre-requisite is my responsibility. This form does <b>not</b> guarantee that time conflict requests and/or pre-requisite waiver requests will be approved.</p>			
Student Signature		Date	

(EX: Fall2024)

**Term:** \_\_\_\_\_

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

**Term:** \_\_\_\_\_

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**Term:** \_\_\_\_\_

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**Term:** \_\_\_\_\_

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**Term:** \_\_\_\_\_

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**Term:** \_\_\_\_\_

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Academic Advisor Comments: