APPEAL TO REPEAT A CLASS MORE THAN ONCE  
University of California, Santa Cruz

Instructions:
Complete and submit this appeal to your college before priority enrollment for the term you wish to enroll; the final deadline is the first day of instruction. Include: 1) A justification letter (instructions below); 2) An academic plan- p. 3; to be completed by the student. [Academic Senate Regulation 9.1.8: https://www.ue.ucsc.edu/RepetitionOfCourses].

Timing and enrollment:
Petitions may NOT be considered after the final deadline (the first day of instruction). If approved, you are responsible for pursuing enrollment with your college adviser; you will not be guaranteed enrollment during your specific appointment times, nor can we guarantee class space will be available. Petitions may take 2-4 weeks for processing- please time the submission of your materials accordingly.

Justification letter guidelines:
Provide a concise explanation of any extenuating circumstances that impacted your ability to successfully complete this course (attach supporting documentation).
- Describe steps you have taken to manage the extenuating circumstances and how you plan to be successful should your appeal be approved.
- Describe any alternatives you have to retaking this class at UCSC (e.g. taking it elsewhere, taking an alternate course, changing your declared or intended major, etc.)

This section is for the student:

Name: _________________________________ Student ID#: ____________________________

College: _______________________________ Date: ____________________________

☐ Intended (proposed)   OR   ☐ Declared Major: _______________________________

If undeclared, are you past the 6th quarter (2nd quarter, for transfer students) declaration deadline?
☐ Yes ☐ No

Class you are requesting to repeat: __________________________ Quarter: __________

Class #: ___________   Lab or Discussion Section, if applicable: ______________________

Previous Attempts: Quarter: __________, 20_________ Grade: __________

Quarter: ____________, 20_________ Grade: __________

NOTE: Be sure to attach a justification statement (instructions above)

Double Repeat Petition p.1
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This section is for academic advisers only:

Department / Major Review:

Is the class in question part of the major's qualification policy?  □ Yes □ No
Will the academic plan (attached) allow the student to complete the major?  □ Yes □ No
Does the department recommend approval to enroll in the class listed above?  □ Yes □ No

Comments (indicate any recommended alternate plans (e.g. take the class elsewhere, pursue an alternate major, etc.)):
____________________________________________________________________________________________________________________________________________________
____________________________________________________________________________________________________________________________________________________
____________________________________________________________________________________________________________________________________________________
____________________________________________________________________________________________________________________________________________________

College Review:

□ No alternate major that can be completed within time to degree policies and no alternate course option
□ Well-documented extenuating circumstances
□ With no department/major review: one attempt was W grade prior to fall 2012
□ Denied with no department/major review: major qualification course, student undeclared
□ Does not meet criteria for policy guidelines: https://www.ue.ucsc.edu/RepetitionOfCourses
□ Approved □ Denied

Comments (if denied, indicate an alternate path to declaration or graduation, and what follow up is needed):
____________________________________________________________________________________________________________________________________________________
____________________________________________________________________________________________________________________________________________________

Signature of College Provost or Designee: ________________________________

Student Notified (date and method): ________________________________

Distribution: College > Major Advising Office > Student
Revised by The Office of Campus Advising Coordination 1/12/17
### UCSC Academic Planning Form

*This Academic Planning Form is being completed for the following purpose:*

- [ ] Required in declaration of major process
- [ ] General Academic Planning
- [ ] Readmission for__________ term
- [ ] For students’ own use (no signature required)
- [ ] Other: ____________________________

#### Consider As You Plan:

- **Major/minor requirements**  
  (Questions? Ask your major/program adviser.)
- **General education, 180 credit requirements**  
  (Questions? Ask your college academic adviser or preceptor.)
- **Courses and programs to meet your educational goals**
- **All requests for extensions/adjustments to your expected graduation term (EGT) must be reviewed by your college. A maximum of 5 academic years (or equivalent) is allowed. See [http://advising.ucsc.edu/student/declaration](http://advising.ucsc.edu/student/declaration) for information on requesting an adjusted EGT.**
- **Since requests are not approved in advance, no upcoming term in plan should include >19 credits.**

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**Student signature:** ____________________________  
**Date:** ____________

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**Major 1:**

- **Senior Comprehensive Requirement:** ____________________________
- **Catalog Requirement Term:** ____________________________
- **DC Requirement:** ____________________________  
  - [ ] N/A (pre-F09 catalog)
- **AIS EGT:** _______  
  - [ ] Extension/Adjustment Needed to: _______  
  - **Adviser, Major 1:** ____________________________  
  - **Date:** ____________

**Major adviser signatures do not verify GE, credit or university requirements.**

**Major 2/Minor:**

- **Senior Comprehensive Requirement:** ____________________________
- **Catalog Requirement Term:** ____________________________
- **DC Requirement:** ____________________________  
  - [ ] N/A (pre-F09 catalog)
- **AIS EGT:** _______  
  - [ ] Extension/Adjustment Needed to: _______  
  - **Adviser, Major 2/Minor:** ____________________________  
  - **Date:** ____________

**Approval for adjusted EGT by College Adviser:** ____________________________  
**Date:** ____________  
- [ ] AIS EGT Adjusted. New EGT: _______