

Mail to: Dawn Morrow
Waubonsee Community College
Route 47 at Waubonsee Drive
Sugar Grove, IL 60554-9454

Date Received _____

FAX to: (630) 466-4964

**WAUBONSEE COMMUNITY COLLEGE
REPEATABLE COURSE GRADE CHANGE REQUEST**
(Attach an unofficial copy of your Waubonsee Transcript)

PLEASE NOTE:

Since certain skill and developmental education courses are designed to be repeatable, it is necessary to complete this form if you wish to have only the most recent higher grades calculated in your GPA. You can see the official procedure in the college catalog.

STUDENT INFORMATION:

Name _____ X Number or Social Security No. _____
Address _____ Home Phone _____ Cell Phone _____
_____ Work Phone _____
City State Zip Code

I request that the following repeatable courses be reviewed for grade change:

<u>Course Name and Number</u>	<u>Grade</u>	<u>Year Taken</u>	<u>Student Initial</u>	<u>WCC approval</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Student Signature

Date

Assistant Vice President of Student Development

Date