

**Petition to Repeat a Course
Result of Substandard Work and/or Withdrawals**

DATE RECEIVED _____
INITIALS _____

Students who have exhausted the ability to repeat a class as a result of substandard work, or the maximum withdrawals allowed in a combination of substandard work and withdrawals may petition to repeat a course provided the College finds that there are extenuating circumstances which justify an additional repetition. Extenuating circumstances are verified cases of accident, illness, or other circumstances beyond the control of the student.

PLEASE PRINT. ALLOW 10 WORKING DAYS, FROM DATE RECEIVED, FOR REVIEW PROCESS.	
MARIN I.D. # _____	
NAME _____	
LAST	FIRST
MIDDLE INITIAL _____	
MAILING ADDRESS	

NUMBER & STREET	

CITY	STATE
ZIP _____	
DAY PHONE	EMAIL ADDRESS
_____	_____
AREA CODE	TELEPHONE NUMBER

COURSE REPETITION	
Counselor's signature is required. You must meet with a counselor prior to submitting this petition.	
COURSE TITLE _____ TERM <input type="checkbox"/> FALL _____ <input type="checkbox"/> SPRING _____ <input type="checkbox"/> SUMMER _____	
I am petitioning to repeat the above course for the following reason (check one):	
<input type="checkbox"/> Substandard grade of D, F, FW, NC, NP or the symbol "W" due to, at least in part, extenuating circumstances. Check circumstance and briefly explain below. Attach all supporting documents.	
<input type="checkbox"/> Accident	<input type="checkbox"/> Work conflict
<input type="checkbox"/> Health	<input type="checkbox"/> Extended litigation
<input type="checkbox"/> Jury duty	<input type="checkbox"/> Incarceration
<input type="checkbox"/> Military service	<input type="checkbox"/> Family emergency
<input type="checkbox"/> Institutional error	<input type="checkbox"/> DSPS Disabled Student Program Services

COUNSELOR'S COMMENTS	
COUNSELOR'S SIGNATURE _____ DATE _____	
STUDENT SIGNATURE _____ DATE _____	
IMPORTANT: If you have been authorized to repeat a course, you must wait one week after the start of new and readmitted student registration to register for the course.	
DO NOT WRITE BELOW THIS LINE	
DEAN OF ENROLLMENT SERVICES	<input type="checkbox"/> APPROVED <input type="checkbox"/> DENIED <input type="checkbox"/> PENDING
DATE _____	SIGNATURE _____
REASON FOR DENIAL OR PENDING PETITION	