Course Repeat Petition

Office of Admissions & Records, 1000 Hensley Creek Road, Ukiah, CA
(p) 707/468-3101 ▪ (f) 707/468-3430 ▪ registration@mendocino.edu

MENDOCINO COLLEGE

Student Name:_____ Student ID Number: _____

Email:_____ Phone Number:_____

The course I wish to repeat:	The semester I want to repeat the course:
_____	_____

Approval of repeating a course will only be granted in the conditions below. Please check the box next to the condition that applies to you. It is your responsibility to provide supporting documentation for the reason selected. Petitions submitted without documentation will be automatically denied.

☐ I need to repeat this course to meet a legally mandated training requirement as a condition of my continued or volunteer employment for:_____
I have attached verification of my employment and the legal requirements necessitating a course repeat.

☐ I need to repeat a course beyond the maximum times allowed, due to the following extenuating circumstances*:_____
_____
_____
*Extenuating circumstances include accident, illness, or circumstances beyond the student's control.
I have attached verification of my extenuating circumstance.

☐ I need to repeat this course because of a significant lapse in time since I last took the course. I am repeating the course to satisfy: A Mendocino College recent prerequisite for: _____
A recency requirement for another college/university:_____
I have attached verification of the recency requirement.

☐ I need to repeat the course due to a significant change in industry or licensure standards since I last took the course and the course is required for the following employment or licensure:_____
I have attached verification of the significant change AND my employment/licensure.

☐ I am a red-shirted or grey-shirted athlete and need to repeat this course as it is specifically required for conditioning or skill development for the sport. A signature from the Athletic Director and Dean of Instruction is required:
Athletic Director:_____ Dean of Instruction:_____

Student Signature:_____
Date:_____

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Petition Approved Petition Denied Eligible for Appointment: Yes No

Reason for approval/denial:_____

Admissions & Records Reviewer: _____ Date:_____