## Repeat Course Petition Procedures For students Requesting to be Enrolled into a Class in Excess of Three Times

Name:				CTC Link #:
	Last	First	M.I.	
Address:	Number	Street	Apt. #	Date of Birth:
	Number	Street	Арт. #	Email:
City		State	Zip Code	Phone Number:
after the i attempts,	nitial enrollme you are requir	nt for a total of three atte ed to complete this Petition	empts. Before you on for Exception to	nical Colleges, students may only repeat a course twice will be permitted to register for classes in excess of three Enroll into a Class in Excess of Three Times.  dean of enrollment services prior to the beginning of the
quarter.				
Eligibility	Criteria to su	ıbmit petition: All conditi	ons below must be	met.
The co A copy	ourse under con of the EP mus	nsideration must be on that be attached to petition.	e EP with the reas	The EP must include planning for current Academic year. on why the student needs to repeat it.
Suppo	rting documen	tation must be included fo	or each extenuating	g circumstance listed in petition.
Provide th	ne following info	ormation for the course ar	nd quarter in which	you wish to enroll:
	COURS	E Name and item #	:	QUARTER/ YEAR
Required	steps and do	cumentation (Incomplet	te petitions will no	ot be accepted):
∏Step	•		•	• ,
1 1		reason(s) for the course	you wish to repeat.	
		• ,	,	our academic performance in this course.

**Extenuating Circumstances:** According to SBCTC policy, 5.30.25 "extenuating circumstances may include, but not limited to, medical or military withdraws as defined in state statute, course required for a certificate or degree with limited or no substitute option, significant break in enrollment, grade forgiveness process, or mandated training for employment." **Please refer to the extenuating circumstances when submitting this petition.** 

Step 3 - Attach the Comprehensive Education Plan (EP) and supporting documents to verify and support your

Step 4 - Submit all documents, within the filing period dates, subject line- Fourth Attempt via email to

Step 2 - Meet with a SVC advisor to obtain a Comprehensive Educational Plan (EP).

Note: Official documentation is necessary for the review and approval process.

reason(s) for repeating the course.

darlene.snider@skagit.edu

Name:	CTCLINK #:			
Specifically describe the extenuating circumstances that prevented you from successfully completing this course. (Attach additional pages if necessary):				
1st Attempt Quarter/Year	Grade:			
List Extenuating Circumstance:				
Type of documentation attached:				
Final size the acute acu				
2 <sup>nd</sup> Attempt Quarter /Year	Grade:			
List Extenuating Circumstance:				
Type of documentation attached:				
Explain the extenuating cirumstance:				
3 <sup>rd</sup> Attempt Quarter/Year	Grade:			
List Extenuating Circumstance:				
Type of documentation attached:				
Explain the extenuating circumstance:				
Check which measures you have taken or will take	to improve your academic performance in this course:			
$\square$ Utilize tutoring. For example, Math lab or Writing	g Center.			
$\square$ Reduce work hours or course load.				
$\square$ Meet with instructor during office hours.				
Student Signature:	Date:			