



College of Engineering

Repeat Option

PERSONAL INFORMATION

Name: _____ UK ID #: _____
(Last, First, Middle)

UK Email: _____ Phone #: _____

Engineering Major: _____ Advisor: _____

COURSE(S) INFORMATION

Prefix	Number	Title	Credit Hours	First Enrollment			Second Enrollment	
				Term	Year	Grade	Term	Year

ACKNOWLEDGEMENTS

I hereby designate this as part of the three such courses that it is my option to repeat in which only the grade, credit hours, and quality points for the **second completion** will be used in computing my academic standing. The repeat option may be exercised **only the second time** a student takes a course for a letter grade, **not a subsequent time**. My signature below indicates that I clearly understand that I **CANNOT** at a later date change this designation in favor of other courses I have repeated or will repeat.

Requested by:

_____ OR _____
 Student Signature Student Initials Date

Approved by:

 Engineering Student Records Signature