Department of Physics

Request for Permission for Second Repeat (3rd Attempt) of a Physics Course

IMPORTANT: All students seeking third attempt permission for any physics course must schedule an appointment with the Physics undergraduate advisors (contact email: physics-ugadvisor@uwm.edu). Students should fully complete both this form in blue or black ink and an official add/drop form, and bring both forms to the meeting. Add/drop forms are available in the Physics main office (KIRC room 2150) and/or in the Registrar’s Office (Mellencamp Hall). Students must also bring a recent, unofficial transcript to the meeting. After this form, fully executed, is returned to you and the add/drop form has been signed, please take both forms to Holton Hall – Room 143 if you are in Letters and Science; otherwise, go to the advising office in the unit (e.g., Health Sciences, Engineering) to which you belong.

Student’s Name: ____________________________________________ Student ID #: ________________________________

UWM Email: ____________________________________________ Phone: ________________________________

I request permission to repeat the following course for a second time (3rd attempt):

Course Number: ____________________________ Lecture / Lab / Discussion ____________________________

(Circle accordingly)

Semester / Year: ____________________________

Previous enrollment in this course:

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<tr>
<th>Semester / Year</th>
<th>Instructor (for lecture)</th>
<th>Was semester completed?</th>
<th>Grade</th>
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Student Signature: ____________________________ Date: ____________________________

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DECISION

TO: UWM Registrar’s Office

Date and time of meeting with student ____________________________

As a result of the required meeting, the Physics undergraduate advisors have determined that this student should be permitted to repeat this course (lecture/lab/discussion) for a second time.

Department approval (name, title) ____________________________ Signature and department stamp ____________________________ Date ____________________________