

Student Grade Repeat Request Form

1. If you repeat a course and receive a higher grade, you can request that your original grade be changed to an "R"
2. Fill out the below form and turn it into the Enrollment Center in Building 2, Room 200 on the Salem campus with photo ID to request your grade be updated in your record
 - a. If you are not able to come on campus, you may email a completed and scanned copy of this form from your MyChemeketa email address to registrar@chemeketa.edu
3. Please note that both the original and repeated course must be taken through Chemeketa Community College to qualify for a grade change
4. **Both the original and repeated course must be equivalent**
5. If you repeat a course more than once, **only your original grade can be changed to an "R"**
 - a. If you repeat a course and receive a lower grade then both grades will remain on the transcript
 - b. An original mark of "W" or a grade of "N" or "I" may not be changed by repeating the course
6. Once a grade has been changed to an "R" it cannot be reversed
7. Some four year universities may treat the "R" grade differently when reviewing your Chemeketa transcript
8. If you are receiving **veteran's education benefits**, you should be aware that this could create an overpayment for the term for which you are requesting the "R" grade. Contact Veteran Services (Bldg 2, Rm 200) before making the request.

Student ID (K#): Date: - -

Name: _____
Last, First, Middle

Address: _____
Street, City, State Zip

Cell Phone with Area Code _____ Email: _____@mychemeketa.edu

Course Subject & #: _____ Title: _____ Credits: _____
(example MTH 095)

Original grade term: _____ Course repeat term: _____
(example Fall 2014) (example Fall 2014)

Original grade of: B C D D F to be changed to: R

Course Subject & #: _____ Title: _____ Credits: _____
(example MTH 095)

Original grade term: _____ Course repeat term: _____
(example Fall 2014) (example Fall 2014)

Original grade of: B C D D F to be changed to: R

Student Signature: _____

Office Use Only

<input type="checkbox"/> I.D. <input type="checkbox"/> Address <input type="checkbox"/> Verified number of takes and original grade	First Check: _____	Date: _____
Grade(s) retained for course(s) above: _____	Second Check: _____	Date: _____