The University of Texas at El Paso

College of Nursing

**Request for Course Repeat**

**Sophomore-level Nursing Courses**

**NURS 2303, NURS 2502, NURS 2407**

**2024-2025**

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ UTEP ID \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ e-mail \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I am requesting permission to take the following course(s) for the second time:

Check all that apply (**a maximum of 2 attempts are allowed in any nursing course**)

List the semester you wish to retake one or more of the sophomore-level nursing courses:

Semester/Year: \_\_\_\_\_\_\_\_\_\_\_\_\_

□ NURS 2303 Introduction to Nursing Practice

□ NURS 2407 Pharmacology for Nursing

□ NURS 2502 Pathophysiology

If selected, students will be required to pass any nursing course on the second attempt to avoid dismissal from the nursing program.

**Please complete the following statements:**

I failed or withdrew from this/these course(s) for the following reason(s):

To be successful in the course(s) for the second time, I am planning to: (be specific)

The decision to give permission to retake is based on: space availability, overall GPA, pre-professional courses GPA, and TEAS scores. **Repeating a course is not automatic.**

I am fully aware of the policy regarding repeating a nursing course as attested by my signature below:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student signature           Date