The University of Texas at El Paso College of Nursing

Request for Course Repeat Phase 2 Nursing Courses

Name	UTEP ID	
Phone Number	e-mail	
, ,,	ne following course(s) for the second time: attempts are allowed in any one nursing course)	
List the semester you wish to retake	one or more of the Phase 2 courses: Semester/Year:	
□ NURS 2303 Introduction to Nursin	ng Practice	
☐ NURS 2407 Pharmacology for Nu	sing	
□ NURS 2502 Pathophysiology		
If selected, it is highly recommended competitive for ranking.	for a student to earn an "A" on a second course attempt to be	9
Please complete the following states	nents:	
I failed or withdrew from this/these o	ourse(s) for the following reason(s):	
In order to be successful in the course	e(s) for the second time, I am planning to: (be specific)	
courses GPA, overall GPA, and TEAS s	take is based on: space availability, Phase 2 Nursing GPA, pre-locore. Ranking will take place the week of finals. The highest graph of the place the week of finals. The highest graph of the place is not automatic.	•
I am fully aware of the policy regarding	ng repeating a nursing course as attested by my signature belo	ow:
Student signature	 Date	