

The University of Texas at El Paso
College of Nursing

Request for Course Repeat (Phase 3)

To: Assistant Dean for UG Student Affairs

From: _____
Name UTEP ID#

Phone Number e-mail

What semester are you? Please check one 5th 6th 7th 8th

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

| 5th Semester | 6th Semester | 7th Semester | 8th Semester |
|--------------|--------------|--------------|--------------|
| NURS 3214 | NURS 3709 | NURS 4714 | NURS 4306 |
| NURS 3401 | NURS 3300 | NURS 4608 | NURS 4511 |
| NURS 3604 | NURS 3205 | | NURS 4412 |

I failed or withdrew from this course (state in which semester) for the following reason(s):

In order to be successful in the course this time, I am planning to [be specific]:

Read the following and sign:

“A student may repeat a nursing course only once...the student’s written request, and approval by the Assistant Dean for Undergraduate Education are needed to retake the course. The decision to give permission to retake is based on: space availability, Nursing GPA, previous failures, previous withdrawals and faculty recommendation. Repeating a course is not automatic.”

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

Student Signature Date

Approved / Not approved _____
Assistant Dean for Student Affairs Date