

Office of the Registrar

TENNESSEE TECH

Student Name: _____ T#: _____ Term: _____
(Last) (First) (MI)

This form is to be completed ONLY for courses in which a grade of B or better has been earned.

Current Course Information:

Previous Course Information:

Please explain why you want to repeat the course(s):

By signing below, you acknowledge you will be registered for the requested course(s) upon approval and will be responsible for any associated course fees. Please **submit the completed and signed form to the (1) Chairperson and (2) Dean of your Major.**