

Mathematics Department
Illinois State University
Request Permission to Take a Course for a Third Time

Name _____ UID _____

e-mail _____ Local Phone _____

Sequence _____ Hours Completed _____

Overall GPA _____ MAT GPA _____

Course that needs to be retaken _____

In the space below, provide evidence of or explain the extenuating circumstances that support why you should be granted permission for a third enrollment in the class listed above. Please attach documentation, if applicable. NOTE: Needing the course for the major or attempting to improve your grade in this course are not sufficient reasons for the granting of this request.