



Permission to Repeat a Course Request

For students seeking to Repeat courses. This form must be **submitted** to the Office of the Registrar **before the drop/add deadline.**

Step 1: Please provide the following information

Student ID Number

| | | | | | | | |
|---|---|---|---|--|--|--|--|
| S | 0 | 0 | 0 | | | | |
|---|---|---|---|--|--|--|--|

Phone

Student Name:

Last First Middle

Are you a Scholarship Student? YES NO

Semester Fall Spring Summer Year

| | | | |
|---|---|--|--|
| 2 | 0 | | |
|---|---|--|--|

 Summer Block 1 2

Step 2: Course information

If you have more than two previous attempts please provide course information for the two latest semesters

| Original Course Information | | Repeat Course Information |
|-----------------------------------|-----------------------------------|-----------------------------------|
| Term: _____ | Term: _____ | Term: _____ |
| Subject: _____ | Subject: _____ | Subject: _____ |
| Course Number & Section: _____ | Course Number & Section: _____ | Course Number & Section: _____ |
| Grade: _____ | Grade: _____ | |

I am aware that:

This form is required if repeating a course for the 3rd time or more, including withdrawals.

Step 3: Academic Consent.

Appropriate Dean's Signature & Date

Approved Rejected

Office of the Registrar
American University of Kuwait
☎ Tel: + (965) 2224 8399 ext. 3164
☎ Fax: + (965) 2571 5891

RO USE ONLY:

Processed by: _____
(Initials)

Date: _____