## REPORT OF REPEATED COURSE

## Ecclesia College

Registrar's Office

Name:	Student ID#:_		Email	l:			
Local Address:	Phone:						
Major:	Class	:	☐ So	☐ Jr	☐ Sr		
IMPORTANT INFORMATION:							
A course that is repeated at EC to replace the original of the document with a note indicating the first grade given courses by completing a Report of Repeated course for the original credit removed, but the grade-point average	n and a Repearm. Courses si	at flag. The st uccessfully re	udent must peated outs	notify the side EC wi	Registrar's	Office of	of any repeated
Original Course:		Repeated C	Course:				
Title:		Title:					
Course #Year Taken:		Course #		Year	Taken:		
☐ Fall	Spring				F	-all	☐ Spring
Grade:					G	rade:	
Original Course:		Repeated C	Course:				
Title:		Title:					
Course #Year Taken:		Course #		Year	Taken:		
☐ Fall	Spring				☐ F	-all	☐ Spring
Grade:					G	rade:	
Original Course:		Repeated C	Course:				
Title:		Title:					
Course #Year Taken:		Course #					
☐ Fall [	Spring				☐ F	-all	Spring
Grade:					G	rade:	

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