Los Angeles Community College District

## REQUEST FOR REVIEW OF STUDENT RECORD

Last Name	First Name	Student ID Number	
Maiden/differe	ent name used	Date of Birth	
Please review/adjust my records  A. I have repeated a course		w: rade from my overall grade point average.	
irectly to Admissions. The highest grade e cademic record. Previous substandard gra	arned will be computed in the cumulatide(s) will be removed from cumulative	" or "F"), a student should complete this form and submit it ve grade-point-average and will be so annotated on the student' grade point average and cumulative total units. Courses is policy is adopted for use of courses in the Los Angeles	
Course Name & Number:			
Semester/Year First Taken:	Semester/\	ear Repeated:	
Grade:		Grade:	
Course Name & Number:			
Semester/Year First Taken:	Semester/\	ear Repeated:	
Grade:		Grade:	
Course Name & Number:			
Semester/Year First Taken:	Semester/\	ear Repeated:	
Grade:		Grade:	
	•	below. I do not intend to make up the gned immediately. I wish to waive the one-year	
Student Signature:		Date:	
	FOR OFFICE USE (	ONLY	
Processed by:	Date:	_	

LOS ANGELES PIERCE COLLEGE
Admissions and Records Office 6201 Winnetka Ave. Woodland Hills, CA 91371