REQUEST FOR REVIEW OF STUDENT RECORD

Last Name	First Name	Student ID Number	
Maiden/differ	ent name used	Date of Birth	
lease review/adjust my record	s for the item(s) checked belov	v:	
A. I have repeated a course	. Please remove the original gr	ade from my overall grade point average.	
directly to Admissions. The highest grade e academic record. Previous substandard gra	earned will be computed in the cumulative gade(s) will be removed from cumulative g	or "F"), a student should complete this form and submit it grade-point-average and will be so annotated on the studer 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/Y	_ Semester/Year Repeated:	
Grade:		Grade:	
Course Name & Number:			
Semester/Year First Taken:	Semester/Y	ear Repeated:	
Grade:		Grade:	
Course Name & Number:			
Semester/Year First Taken:	Semester/Y	Semester/Year Repeated:	
Grade:		Grade:	
_	•	below. I do not intend to make up the d immediately. I wish to waive the one-year	
Course Name & Number:		Semester/Year Taken:	
Student Signature:		Date:	
	FOR OFFICE USE ONL	Υ	
rocessed by:	Date:		