## ADLAI E. STEVENSON HIGH SCHOOL

## **COURSE RETAKE REQUEST**

NAME	ID NUMBER	GRADE	
COURSE NAME		SEM 1	SEM 2
COURSE #			
YEAR COURSE WAS ORIGINALLY TAK	EN		
REASON FOR RETAKE:			
Failed Course			
Grade Improvement			
Other (explain)			
<ul> <li>If the course was originally failed waiver for physical education.</li> <li>If the course was originally passed wi</li> <li>The original grade will remain on the will be used to determine the grade point.</li> </ul>	ith a grade of A- or higher e transcript. The grade po	it may not be re	taken.
<ul> <li>The student should return the complete</li> </ul>	ted form to the counselor.		
• After processing, the counselor will s copy for the student file.	submit the original form to	o the registrar an	nd retain a
FOR OFFICE USE ONLY: Processed on _ ORIGINAL: Registrar cc: Cou		<u>'</u>	

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