

# DHS COURSE RETAKE FORM

Some elective courses are available for students to retake for the purposes of increased exposure to curriculum. These elective courses are outlined in the [Registration Guide](#). Courses available for retakes do NOT require this form. Additionally, students may wish to retake a required class for the purpose of improving their grade and/or earning credit; these students must complete and submit this Course Retake Form to their counselor. Upon submission and approval of this form, the student acknowledges that:

- A previous grade of “F” will be changed to “U” after completion of the course with a passing grade.
- A previous passing grade will be changed to “AU” upon approval of the retake. Additionally, any credits earned from the previous attempt will be removed from the student’s transcript.
- The grade and credits earned from the new attempt will replace the previous attempt.
- A student who passes a class and chooses to retake it, will automatically forfeit those credits.
- Once approved, the course cannot be dropped.

It is highly recommended that students wishing to retake a course meet with their counselor to appropriately weigh all their options. Retaking a course may have graduation implications. Courses are subject to availability with priority given to students who are not retaking the course.

This form must be completed for any course a student wishes to retake for which retakes are not automatically allowed.

|                                       |             |                         |                  |
|---------------------------------------|-------------|-------------------------|------------------|
| Date:                                 |             | Student Grade:          |                  |
| Student Name:                         |             |                         |                  |
| Name of Course                        |             |                         |                  |
| Year AND Term Course originally taken |             |                         |                  |
| Previous Grade Earned                 |             | Previous Credits Earned |                  |
| Proposed Year AND Term of retake:     |             |                         |                  |
|                                       | <b>Name</b> | <b>Date</b>             | <b>Signature</b> |
| Parent                                |             |                         |                  |
| Counselor                             |             |                         |                  |
| Administrator                         |             |                         |                  |

CC: Student Cum File and DHS Office