

Student Last Name UCID M		Student First Name		
Original Class (	course that is b	eing repeated)		
Semester	Subject	Course #	Section #	Hours
Course Title				
New Class (cou	rse that will rep	olace the grade 1	from Original Cl	ass)
Semester	Subject	Course #	Section #	Hours
Course Title			Offering College	
Student Signature				
Previous Grade Repl (to be completed by t	lacement Credits he college)			
Offering College App	proval			