



GRADE REPLACEMENT REQUEST

Return to:
Registrar's Office
1025 North Broadway
Milwaukee, WI 53202-3109

Fax: (414) 277-6914
Phone: (414) 277-7215

Name _____ Student number _____

In the _____ quarter of _____ (year), I received a grade of _____ in the course _____.
I plan to take the course for the second time during the _____ quarter of _____ (year) for a grade replacement. I request that the grade that I earn the second time be used in the calculation of my cumulative GPA rather than the grade that I earned the first time.

- I understand that the initial grade I received will still appear on my transcript but will not be calculated into my grade point average.
- I understand that I may grade replace only five (5) courses. After I have used my five replacements, I may still re-take any course but both grades will be calculated into my grade point average. If at any time the Registrar's Office becomes aware that I have already used my limit of five replacements, this Grade Replacement Request becomes void.
- I understand that I must retake the course within one calendar year from the initial time I took it. The only exception to this is if the course has not been offered within one calendar year. If the course has not been offered, I must take it the next time that it is offered. If at any time the Registrar's Office becomes aware that the one year deadline has passed, this Grade Replacement Request becomes void.
- I understand that when I take the course for the second time, the grade point average on my initial report card for that quarter will not reflect this grade replacement.
- I understand that if I fail the same course twice I will be subject to termination.

I am in agreement with the above statements.

Student signature _____

Date _____

Registrar's Office signature _____

Date _____