

Date Received: \_\_\_\_\_

Received By: \_\_\_\_\_

Date Processed: \_\_\_\_\_

## Grade Forgiveness Request

Please complete all required fields in pen. Undergraduate and non-degree seeking who have repeated a course and wish to request approval for the previous course grade be excluded from their grade point average (GPA), must complete this form for consideration. Grade forgiveness is subject to approval if course information differs from the original course completed; approval of the Provost or their designee is required.

**Please review the following policies regarding grade forgiveness before submitting your request.**

1. Grade forgiveness may only be granted for courses taken initially and repeated at Florida Poly; 1000–4000 level courses are eligible only.
2. Original grade of "C-" (C minus) or lower must be recorded on academic record; repeated course grade must be higher than the original grade earned.
3. Submit request no later than your designated graduation application deadline as stated on the Academic Calendar.
4. Grade Forgiveness is limited to two (2) courses (a single time per course) during a student's undergraduate career.
5. All grades remain on student records; grade forgiveness does not exclude grades from academic transcripts, only from a student's GPA.
6. Courses approved for grade forgiveness will be identified on academic transcripts with a "R" annotated next to the course.
7. All credit hours will still be counted towards student's program of study and Excess Hours ([FPU-4.0014P](#)).

STUDENT UID: \_\_\_\_\_

DATE OF REQUEST: \_\_\_\_\_

LAST: \_\_\_\_\_ FIRST: \_\_\_\_\_ MI: \_\_\_\_\_

PHONE: \_\_\_\_\_

EMAIL: \_\_\_\_\_@floridapoly.edu

### Step 1: Course & Grade Confirmation

**Original Course (For summer terms indicate session as: Summer A, Summer B, or Summer C):**

TERM/YEAR	COURSE PREFIX/NUMBER	COURSE TITLE	CREDIT HOURS

**Course (For summer terms indicate session as: Summer A, Summer B, or Summer C):**

TERM/YEAR	COURSE PREFIX/NUMBER	COURSE TITLE	CREDIT HOURS

### Step 2: Student Confirmation

By signing below, I confirm that I have read, understand, and agree to all terms and conditions of the Grade Forgiveness Policy ([FPU-5.0006AP](#)), to include the Excess Hour Fee Policy ([FPU-4.0014P](#)).

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

#### UNIVERSITY REGISTRAR USE ONLY

Provost/Designee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Comments: \_\_\_\_\_

Email Notification    Date Sent: \_\_\_\_\_