THREE-REPEAT FEE EXEMPTION REQUEST FORM

This exemption request form is to be used by students who, in their final semester prior to graduation, must enroll in one or more previously completed courses for the third or more times in order to meet graduation requirements. If the exemption is approved, students will be exempt from paying the additional $100.00 fee per semester credit currently charged for these repeated courses (see TAMUK catalog, under Miscellaneous Fees). This exemption only applies to courses taken in the semester in which the student is graduating and can be granted only once. This Form must be submitted to the Registrar’s Office prior to graduation.

Please Print
Name: ___________________________ College: ___________________________
SID#: K _________________________ Major: ___________________________
Address: ___________________________ □ Undergraduate □ Graduate
                                                  ___________________________
Phone: ___________________________ Semester ___________ Year ___________

I am requesting an exemption of the Three-Repeat fee for the following courses:

<table>
<thead>
<tr>
<th>CRN</th>
<th>Subject</th>
<th>Course #</th>
<th>Section #</th>
<th>Course Title</th>
<th>Advisor’s initials</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Advisor: I have reviewed the course(s) listed on this form and certify that they are a requirement for graduation for the student.

Advisor’s Name: ___________________________ Phone: ___________________________
Advisor’s Signature ___________________________ Date ___________________________

Student: I understand that this exemption only applies to courses taken in the semester in which a student is graduating and can be granted only once. If for whatever reason I do not graduate during the semester for which these fees are waived, the three-repeat fee previously waived will be billed to my student account and a hold will be placed on my record until such fees are paid.

Student Signature ___________________________ Date ___________________________

For Registrar’s Office use only
Processed by ___________________________ Date ___________________________
Date remitted to business office _______

7/2006 Student Attribute 3RR

Students: Return this form to the Registrar’s Office.