

# Coursework (GPA Improvement) Retake Approval Form

The University of Southern Mississippi  
Graduate School  
118 College Drive #5024 Hattiesburg MS 39406

*This PDF form is fillable. Handwritten copies will not be accepted.*

Student should complete this form, sign, obtain the Program Coordinator's signature, and submit completed form via email.

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

Student ID: \_\_\_\_\_

Student Name: \_\_\_\_\_

A graduate student may retake only one graduate level course in order to improve their grade point average.

Course Prefix & Number: (ex: ACC 560)	_____	1st Term Taken: _____	Term Repeated: _____
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Program Coordinator  
Printed Name: \_\_\_\_\_

Program Coordinator  
Signature: \_\_\_\_\_

Student Signature: \* \_\_\_\_\_

\*Student's signature indicates student understands this policy.

\*See Graduate Bulletin: General Academic Information "Course Retake Policy" section.

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## Graduate School Use Only

Degree Auditor Processed: \_\_\_\_\_ Date: \_\_\_\_\_