



# FOOTHILL COLLEGE

## THIRD AND FINAL ATTEMPT OF A DISTRICTWIDE COURSE

PLEASE TYPE OR PRINT CLEARLY. SUBMIT TO ADMISSIONS AND RECORDS OFFICE OR [WEBREGFH@FHDA.EDU](mailto:WEBREGFH@FHDA.EDU)

STUDENT INFORMATION – INFORMATION FROM STUDENT REQUESTING THE RELEASE OF HOLD

OFFICE  
USE ONLY

Processed  
by

Date

Term

Last Name	First Name	MI	Campuswide Identification (CWID) Number	Date
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By signing below, I acknowledge the following:

- a. I received a "D," "F," "W," or "NP" and want to take the following course(s) a third time:
- b. I will not be able to take this class again at Foothill College or De Anza College.
- c. I will access resources to ensure that I am successful in my final attempt; such as tutoring, counseling, meeting with my instructor during assigned office hours and studying at least two hours for every one hour I attend class.

COURSE(S) REQUESTED

TERM REQUESTED

STUDENT SIGNATURE