



WCAS Retake Application

Student fills out

DO YOU QUALIFY?	
You must be able to check each box below in order to qualify for a retake. If you meet all the requirements, you may continue filling out this application.	
<input type="checkbox"/> My assignment received a grade below 73%	
<input type="checkbox"/> My overall course grade is under 80%	
<input type="checkbox"/> I received the grade for this assignment within the last 5 business days	
Please state the date the assignment was returned to you: _____ (this is the official date that the teacher marked and returned your assignment; not when you first saw it)	
BASIC INFORMATION	
Student Name:	Date:
Course:	Teacher Name:
Assignment:	

REFLECT	
Previous Score:	
Why do you feel you scored below your ability?	
What did you understand?	Where did you struggle?

Action Plan:

You must plan and provide at least 3 steps that you will take to improve your assignment.

1.

2.

3.

How will you apply what you have learned from this assignment to your future assignments and coursework?

Student signature: _____

Teacher fills out

By signing this document, I, the course instructor, have granted the student permission for a retake of the given assignment.

Teacher signature: _____ Date: _____