**SOCIALIST REPUBLIC OF VIETNAM
Independence – Freedom - Happiness
----------------------------------**

**REQUEST FOR COURSE RETAKE**

**To: Faculty of International Education – Foreign Trade University**

Student’s Name: ..................................................... Student ID: ..............................................

Date of Birth: .................................. In take: ............................................................................

Currently enrolled in class (major):...........................................................................................

Phone Number: .........................................................................................................................

Email: ........................................................................................................................................

I need to retake the following courses:

1. .........................................................................................................................................
2. .........................................................................................................................................
3. .........................................................................................................................................

Reason(s): ............................................................................................................................................................................................................................................................................................................................................................................................................................................................

I hereby submit this request and respectfully ask for approval to retake the course.

I commit to paying the full tuition fee as per the university’s regulations within the specified deadline.

Thank you for your consideration!

|  |  |
| --- | --- |
|  | *........., day ....... month ....... year ........* |
|  | **Applicant** *(Signature and full name)* |