

JOHN CARROLL UNIVERSITY
Student Academic Petition for Pass/Fail Option

Name: _____ Email: _____

Phone: _____ Banner #: _____

Advisor: _____ Minor(s): _____

Major(s): _____

College of Arts and Sciences _____

Boler College of Business _____

Freshman _____

Sophomore _____

Junior _____

Senior _____

Request for Pass/Fail option:

I choose the pass/fail option for _____ (course) taken during the
_____ (semester) term.

I understand that I may not register for more than one pass/fail course per semester and may not use the pass/fail option for any course counted *toward the university core requirements* or in a major sequence, optional minor, or concentration. Business majors may not use the pass/fail option for any Business core courses. The course that I selected for pass/fail will be applied only toward general electives. I have read and understand all the conditions that apply to the pass/fail option as outlined in the Undergraduate Bulletin.

Reason (optional):

Student's Signature: _____ Date: _____

Assistant Dean's Action: Approved Not Approved

Comments:

Assistant Dean's Signature: _____ Date: _____