

JOHN CARROLL UNIVERSITY

Student Academic Petition for Pass/Fail Option

Name: _____ Email _____

Phone: _____ Banner #: _____

Advisor: _____ Minor /Concentration: _____

Major: _____

College of Arts and Sciences _____

Boler School 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 2009-11 Undergraduate Bulletin.

Reason (optional):

Student's Signature: _____ Date: _____

Dean's Action: () Approved () Not Approved

Comments:

Dean: _____

Date: _____

Copy: Student, Advisor, Dean's office and Student Service Center