JOHN CARROLL UNIVERSITY

STUDENT ACADEMIC PETITION FOR PASS/FAIL OPTION

Name:_____ Banner ID:_____

Adviser:_____ Major:_____
Minor and/or Concentration:_____
College of Arts and Sciences_____ Boler School of Business_____
Sophomore_____ Junior_____ Senior_____
Request for Pass/Fail option: I choose the Pass/Fail option for_____(course) taken during the (check one) Fall_____ Spring_____ Summer_____ Year: 20_____

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 select for pass/fail will be applied only toward general electives. I have read and understand the conditions that apply to the pass/fail option as outlined in the 2005-2007 Undergraduate Bulletin.
Student's Signature:_____

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

Dean:_____ Date:_____

COPY: STUDENT, DEAN'S OFFICE AND STUDENT SERVICE CENTER