

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