

SAINT ♦ XAVIER ♦ UNIVERSITY
Office of Records and Advising
Pass/Fail Grade Request

PRINT: _____
Last Name First Middle Initial Maiden/Other

Student ID Number Today's Date Term of Enrollment

I wish to elect Pass/Fail grading for the following course:

Subject Course # Section Title Semester Hours

Instructor's Signature: _____

I understand that Pass/Fail grading may not be taken in:

- 1.) any course fulfilling core requirements;
 - 2.) any course in the major field; and/or
 - 3.) any course specified as required in a major program, even though that course is in a department other than the major
- " **P** " grade is not computed in semester or cumulative average
 " **P** " grade may not be changed to an "A", "B", "C" or "D" grade at a later date
 " **P** " grade may not be used in the calculation of graduation honors
 " **F** " grade does affect the grade point average

Signed form must be in the Office of Records & Advising, Warde Academic Center, Room A203 by Monday of Midterm week.

Student's Signature Date