



## Pass/Fail Grade Permission Form

Office of the Registrar  
Freeman Hall, 1<sup>st</sup> Floor  
[www.belmont.edu/registrar](http://www.belmont.edu/registrar)

Phone: 615-460-6619 Fax: 615-460-5415

**A student must be at least junior standing (earned a minimum of 64 credit hours) to opt for a pass/fail grade. Students may elect up to twelve Belmont academic credit hours, and the course(s) can only count in the general free electives category. The course will not satisfy general education, major or minor/concentration requirements. Once the drop/add period has ended for the term students are not permitted to change the grade from a pass/fail to a normal grade. Review the pass/fail grading policy in the Academic Policy section of the current university undergraduate catalog**

**Instructions:** Present the form to the major academic advisor for approval. After registering for the course, take this form to the class instructor for signed permission of the pass/fail grading option. Bring the completed form with all signatures to the Office of the Registrar for processing. Incomplete forms will not be accepted. This form must be filed with the Registrar's office no later than the last day of the drop/add period within the semester.

Term/Year      Fall \_\_\_\_\_      Spring \_\_\_\_\_      Summer \_\_\_\_\_

Student Name: \_\_\_\_\_      BU ID: \_\_\_\_\_

Major \_\_\_\_\_      Minor \_\_\_\_\_      Circle Status: Junior or Senior

Cumulative earned hours: \_\_\_\_\_      Cumulative Grade point average: \_\_\_\_\_

**I request to take the following course for a final grade of pass or fail:**

<i>Course Prefix</i>	<i>Course Number</i>	<i>Course Section</i>	<i>CRN (five-digits)</i>	<i>Course Title</i>	<i>Credit Hours</i>

**To be completed by major academic advisor:**

Advisor's Name (print): \_\_\_\_\_

Advisor's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**To be completed by the course instructor:**

Instructor's Name (print): \_\_\_\_\_

Instructor's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Please sign below to acknowledge the requirements of the pass/fail grading policy have been reviewed.**

**I request a pass/fail grade mode in the course indicated above.**

**Student Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_