



OFFICE OF ACADEMIC & STUDENT SUPPORT SERVICES
50 Nightingale Hall ♦ 360 Huntington Avenue ♦ Boston, MA 02115
Tel 617.373.2400 ♦ Fax 617.373.5545 ♦ www.northeastern.edu/cps

REQUEST TO ELECT PASS/FAIL GRADE

INSTRUCTIONS:

- Review the course requirements for your major or program and the "S/U ['Pass/Fail'] Grades section of the College of Professional Studies Student Handbook.
- Identify the course for which you would like to take Pass/Fail and provide rationale for the request.
- Submit completed form to the Office of Academic & Student Support Services and allow two to three weeks for the request to be processed.
- Petitions must be received by the fourth class meeting for a 12-week course and by the second class meeting for a four-, six- and eight-week course.
- Student must notify the instructor that pass/fail grading has been approved.

PART I: STUDENT INFORMATION

Student name: _____

First (Given name)

Middle

Last (Family name)

Mailing address: _____

Street

City

State

Zip code

Student ID: 000-_____ Current Degree and Major: _____

Primary telephone number: _____ Email address: _____

PART II: REQUEST FOR PASS/FAIL GRADE

Term for request: Fall Winter Spring Summer Session 1 Session 2 Year: _____

I am requesting to take the following course Pass/Fail:

Course #	Course Title	Instructor Name	# of Credits

Please provide a brief (one-paragraph) rationale for requesting the Pass/Fail grade.

Student signature

Date

FOR OFFICE USE ONLY: Date assigned: _____ Assigned to: _____
Signature: _____ Date complete: _____ Petition: Accepted Denied
Comments: