## **REQUEST FOR A COURSE TO BE PLACED ON PASS/FAIL**

### Deadline: Submit this form to your counselor by the end of the 12th week of each semester.

#### STUDENTS:

The intent of pass/fail is to encourage students to experiment and explore by taking courses they would not take otherwise.

#### SENIORS:

Please consult with the admissions office of the college(s) to which you are applying to find out if they will permit you to take a course pass/fail and how they interpret a pass/fail grade on an applicant's transcript.

#### **GUIDELINES FOR PASS/FAIL:**

- 1. Students may elect any course offered in the school for a pass/fail grade **EXCEPT THOSE REQUIRED FOR GRADUATION**, or those used for meeting a graduation requirement. Traffic Safety is always pass/fail.
- 2. A student may not take a sequential or prerequisite course on a pass/fail basis. Students are ineligible to enroll in a course for which the prerequisite was taken pass/fail. Except with the permission of the department chairperson, only the last semester of an intended sequence may be taken pass/fail.
- 3. A student must elect to take a course on pass/fail basis before the withdraw deadline. Once a student elects to take a course pass/fail, that decision will not be reversed.
- 4. To obtain a "pass" in a course, the student must obtain a grade of "D-" or better in accordance with the standards of that course. If special arrangements regarding the pass/fail course are requested by the student and approved by the teacher, then these special arrangements should be stated in writing.
- 5. A student and their parent/guardian are responsible for the decision to place a course on pass/fail. Parents/guardians must approve decisions to take courses on a pass/fail basis. We recommend the student to consult with the counselor on this decision. Please note that taking a course pass/fail could have an impact on college admissions.
- 6. Per policy 6-300, all students must have at least 37 credits in regularly-graded courses to fulfill graduation requirements; the minimum caseload for full-time students is 5 credits per semester.

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Date:	Counselor Name:		
Student Name:	ID#:`	Year in School (circle): 9 10 11 12	
Course Title:	Teacher Name:		
I accept the conditions set forth in the pass/fa Take the course on a pass/fail basis for the fol	il guidelines and request to	Semester 1 only Semester 2 only Semesters 1 & 2	
Student Signature and Date	Parent/Guardian	Parent/Guardian Signature and Date	
Teacher Signature and Date		r Signature and Date	

Student: Sign and obtain all above signatures and return form to your counselor by the scheduled date.