



Rhodes College

EXP

PERMISSION TO TAKE A COURSE PASS/FAIL

Name _____

Rhodes ID _____ Year of Graduation _____

Permission is requested to take the following course Pass/Fail:
(Be sure to include the lab section of a science course unless it is being taken for a grade.)

_____ CRN

_____ Department/Course/Section

Conditions: The minimum grade to receive the Passing grade is determined by individual faculty and must be indicated here:

Electronic Signature of Student

Date

Electronic Signature of Course Instructor

Date

1. The conditions for meeting the Passing threshold must be spelled out by the instructor on the form, and clearly articulated to the student.
2. The decision to take a course pass/fail is irrevocable after the deadline to do so has passed. Instructors have a right of refusal to allow students to complete the course in this manner. Students are advised to discuss this option with their adviser and the instructor before submitting the form.
3. The Pass/Fail option **should not be used** if the course is being taken as a pre-health elective to fulfill graduate school entry requirements, or if the student plans to seek teacher licensure or apply to a licensure graduate program.
4. Students should check for possible Financial Aid/Scholarship implications before making this choice.
5. The 'P' passing grade does not impact cumulative GPA. **The 'F' failing grade negatively impacts cumulative GPA.**