



PART-TIME PROGRAMS

STUDENT REQUEST TO CHANGE GRADING OPTION

PLEASE READ CAREFULLY BEFORE SIGNING

Today's Date: _____

Students in evening classes receive grades (A, B, C, etc). I want to change from a graded level to the pass/fail-only grade option.

Student Signature _____

PLEASE NOTE

1. Once you change your grading option to P/F, you cannot change it again before the end of the session.
2. This form must be completed, signed and submitted to your instructor **BEFORE** the end of the 3rd week of class.

Print your name: _____ CESL ID Number: _____

Course Name: _____ Instructor Name: _____

Semester: FALL ____ SPRING ____ SUMMER ____ Session: Session I ____ Session II ____

Are you under 18 years old? If you are under the age of 18 years of age, this form must be signed by a parent or guardian.

Date Signed

Parent or Guardian Signature

Printed name

For CESL Use Only: Check one box:

- This request has been received timely and is approved.
- This request has not been received timely and is not approved.
- This request is not approved. Please state reason below:

Date Signed

Course Instructor/Program Coordinator

Completed forms should be returned to the Admissions Office (Room 101) for placement in the student's file.