

## Pass/Not Pass Request

Revised 11/7/19

 901 S. National Avenue ▪ Carrington Hall ▪ Room 320 ▪ Springfield, MO 65897 ▪ registrar@missouristate.edu  
 Ph(417) 836-5520 ▪ Fax(417) 836-6334 ▪ Office Hours: Monday – Friday 8:00am – 5:00pm, Thursday 9:00am – 5:00pm

 Student Name: \_\_\_\_\_ BearPass #: M\_\_\_\_\_  
LAST FIRST MI

Subject	Course Number	Section or CRN	Course Title

 Term:     Fall         Spring         Summer        Year: \_\_\_\_\_

**NOTE:**

- Classes graded as “Pass” may count toward meeting the 120 total hour requirement and 40 hour upper division requirement.

I understand and accept the provisions of the Pass/Not Pass option as described in the Undergraduate Catalog, including the irreversibility of this decision and the prohibition against future use of this course to satisfy the requirement for General Education, major, minor, professional education, specific degree requirements, or requirements for any major or minor which I choose to pursue in the future.

I hereby request that the above listed course be placed on Pass/Not pass.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

 OFFICE USE ONLY: \_\_\_\_\_  
Processed By Date