

## **Petition for Pass / No Pass Grading**

OTTEGS			Fall [	Spring Summer
Last Name	First Name	Middle	<u> </u>	B Number
CRN	Course Name	Units	Class Days/Times	Instructor/Counselor Approval
				ner class, the student may elect, to be evaluated ns and Records for deadlines for submitting
certificate; such units are n planning to transfer to a fo P/NP may not be transferal	ot used in computation of overall g ur year university, it is highly recorble. P/NP grades earned may not b	rade point average. nmended that you is e converted to a let	However, units of NP ARE meet with a counselor prior to ter grade. <b>I, the undersigned</b>	it satisfy BCC requirements for graduation and/or used in computing Progress Probation. If you are choosing this grading option. Courses taken, have read the above information and hereby any right to request future changes.
	Student Signature			Date

AR013 rev. 05/05