



SIMMONS UNIVERSITY  
Office of the Registrar  
300 The Fenway, Boston, MA 02115  
Tel 617.521.2111 Fax 617.521.3144  
**PASS/FAIL FORM**

Please print the following information:

Student Name: \_\_\_\_\_

Simmons ID #: \_\_\_\_\_ Class Year: \_\_\_\_\_

Undergraduate students may select one course for the pass/fail grading option each semester.

Courses taken to fulfill certain competency requirements may not be taken for the pass/fail option (i.e. the Boston Course, any course counting toward the Language Requirement, MATH 101, MATH 102, Independent Learning, The Capstone). **In addition, certain majors and minors require that courses be taken for a letter grade.** Decisions regarding pass/fail should be discussed with your academic adviser.

*As with all transactions, you should retain a copy of this form for your records.* The form is valid only when **dated and initialed** by a member of the Registrar's Office staff.

**COURSE DESIGNATED FOR PASS/FAIL:**

Course Dept: \_\_\_\_\_ Course No: \_\_\_\_\_ Section: \_\_\_\_\_

Instructor Name: \_\_\_\_\_

Please note that pass/fail does not affect your GPA when the grade is a Pass. A failing grade will affect your GPA.

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Instructor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Adviser's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Registrar's Staff: \_\_\_\_\_ Date: \_\_\_\_\_

If taking for Major or Minor:

Department Chair: \_\_\_\_\_ Date: \_\_\_\_\_

**RETAIN THE LAST COPY FOR YOUR RECORDS AFTER THE FORM IS PROCESSED IN THE REGISTRAR'S OFFICE.**