ELECTION FOR OPTIONAL PASS/NO PASS

Student ID Number

Important: This form must be completed no later than the deadline stated in the catalog, or during the first 30% of an irregular term course. Once submitted, the option is irrevocable and cannot be rescinded.

Please print all information:

Term: ___________________ Year: ___________________

Student Name: ________________________________

Last ______________ First ______________ Middle Initial

Control Number __________________ Course Number __________________ Course Title __________________

Note: A maximum of 8 units with the symbol “P” may count toward an Associate Degree, or 6 such units toward a Certificate of Achievement.

I will be taking this class on a Pass/No Pass basis, valid only for courses which are graded optional. I understand that a P or NP cannot be converted to another grade.

Date: _______________ Student Signature: ____________________

To be valid, the student must submit Election for Pass/No Pass no later than the deadline stated in the college catalog. Submit to Admissions and Records.

Admissions and Records
3536 Butte Campus Drive
Oroville, CA 95965

AR14-FEBrev

530.895.2361 Phone
530.879.4313 Fax