Print First & Last Name (Surname): ___________________________________________ PID: ______________________

MSU Email Address: ___________________________________________@msu.edu Phone Number: _______________________________

Semester: Fall 20_____ Spring 20_____ Summer 20_____

Guidelines for Pass/Fail Grading Option:

1. LL.M./M.J. students may elect to register for no more than three (3) courses or a maximum of ten (10) credits as Pass/Fail. Students who sign up for more than the maximum credits available under the Pass/Fail option will have the course that exceeds the maximum credits graded.

2. You must receive a grade of “D-“ or better in order to receive the grade of “P” (Pass). If you earn a grade of “F” you will receive a grade of “F” (Fail) for the course.

3. Only courses that count toward the 24 credits needed to satisfy graduation requirements will be included in the 10 credit hours that are permitted to be taken “pass/fail”.

4. An election to take a course on a Pass/Fail basis may be made no later than the last day of classes for the semester or before any type of final exam (including a take-home examination) is distributed, whichever occurs first.

I hereby ELECT the following course(s) as Pass/Fail:

Course #: ________ Section: _______ Course Name: ____________________________________ Credit(s): ____

Course #: ________ Section: _______ Course Name: ____________________________________ Credit(s): ____

I hereby CANCEL the following course(s) as Pass/Fail:

Course #: ________ Section: _______ Course Name: ____________________________________ Credit(s): ____

Course #: ________ Section: _______ Course Name: ____________________________________ Credit(s): ____

This form may be submitted via mail, fax, email, and in person to the address listed at the top of this form. I understand that the Registrar’s Office requires at least 24-48 hours to process all requests.

Student Signature: ___________________________________________ Date: ______________

Office of Student Engagement Advisor Signature: ___________________________ Date: ______________

OFFICE USE ONLY: SIS Entry Staff Initials: ______ Date: ______ Updated 4/19/18