

Application and Approval to Enroll in a Pass/Fail Course

Student Name _____ Date _____

ID# _____ Grade Level 11th or 12th
(circle one)

I am requesting enrollment in the following pass/fail course(s):

1) _____ Class Period _____

I have spoken to my counselor to determine eligibility, and I understand how a pass/fail course will affect my eligibility for honor roll, class rank, UIL participation and other school- approved activities which have a grade requirement. I further understand that failing to earn the additional credits, 23rd and 24th credits for the Foundation Program or 27th and 28th credits for the Foundation+ Endorsement Program will cause this course to be calculated in my grade point average (GPA).

_____ Student's Name- Please Print	_____ Date
_____ Student's Signature	_____ Date
_____ Teacher or Department Chair's Signature	_____ Date
_____ Parent's Signature	_____ Date
_____ Counselor's Signature	_____ Date