

# Graduate Student Pass/Fail Approval Form

BOSTON COLLEGE  
2€FH RI 6WXGHQW 6

Instructions: Use this form ONLY after the pass/fail deadline has passed.

Date: \_\_\_\_\_

Academic Year: \_\_\_\_\_ to \_\_\_\_\_

Eagle ID Number:

Semester:

T First

T Second

T Summer

Name: \_\_\_\_\_  
Last First

Requires Permission of Associate  
Dean: (see below)

R GSMCAS (02) Candace Hetzner

R LAW (04) Daniel Lyons

R BCSSW (06) Teresa Schirmer

R Lynch, Graduate Programs (10) Steven Viveiros

R

Index # Course #

Instructor Approval: \_\_\_\_\_

Date: \_\_\_\_\_

\$VVRFLDWH 'HDQâV 2ÄFH \$SSURYDO \_\_\_\_\_

Date: \_\_\_\_\_