

Graduate Student Pass/Fail Approval Form

BOSTON COLLEGE
Office of Student Services

Instructions: *ONLY* *ONLINE*

Department: _____

Electronic ID Number:

Name: _____
Last First

Identification #

Approval Authority: _____

Approval Authority: _____

Approval Authority: _____

- F
- S
- S

Reason for Pass/Fail Approval:
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- GA&S (02) C H
- LA (04) E R
- GSS (06) S
- LSOE, G P (10) E S
- CSOM, G P (11) J R
- CSON, G P (14) M. K H
- S M (18) J B

Department: _____

Department: _____