

Date _____

Effective Term _____

Hollins University Pass/Fail/Audit Form

Last Name _____ First _____ Hollins Email: _____

Student ID _____ Class Year _____ Major _____

CRN	Subject	Course #	Section	Cr Hrs	Please Check		Instructor's Signature
					P/F	Audit	

- NOTES:**
1. Pass/Fail option in the major/minor field is not available.
 2. The grade of Pass **is not** included in the computation of the grade point average.
 3. The grade of Fail **is** computed in the grade point average.
 4. Students must have 14 graded credits to be eligible for honors that term.
 5. Instructor's and Advisor's signatures are required.
 6. See catalog for minimum number of graded credits required to graduate with institutional honors.

Student's Signature

Advisor's Signature

Rev. 07/24/08
PassFail

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