

Request for Pass/No Pass

Processe	d by: Date processed:	
	OFFICE USE ONLY	
Submit this form to the Admissions a (619.644.7933), or in person (Buildin	nd Records Office via e-mail (Grossmont. g 10-Student Services).	.AR-NoReply@gcccd.edu), fax
Signature		Date
My signature below indicates I have i	read, understood, and accepted the abov	re provisions.
Once the P/NP deadline has	passed, this option is irrevocable.	
counted in satisfaction of gen graduation.	earned at Grossmont College with Feral education and elective curriculu	· ·
	inted toward fulfillment of major requ s graded on a P/NP basis only).	irements (except for
I understand that:		
Course Name	Section #	
Term	Year	
Class Information:		
		Initial
Last Name	First Name	Middle
Student's ID		