

PERMISSION TO TAKE A COURSE PASS/NO PASS ELECTIVE COURSES ONLY

- Complete and submit form to lawregistrar@udmercy.edu
- Handwritten signature (not electronic) is required for processing
- Processing requires 2 business days
- You will be notified by email whether your request is approved or denied
- **Deadline:** must be submitted by the last day of classes for the Term or the day before the exam is administered, whichever comes first.

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Student Name				Student ID Number		
First T	erm at Detro	it Mercy Law	,			
Term Requested:		□ Fall □ Winter □ Summer	Year: 20	Division:	□ Dual JD□ Full-time (JD)□ Part-time (JD)□ Extended (JD)	
l elect	to use the p	ass/no pass o	option for the followi	ng elective cours	e:	
CRN	Title			Professor	Credits	
l certif		igible to use t	the pass/no pass opt	ion. I comply with	n all of the following	
1. 2. 3. 4. 5.	To date, I have completed at least 30 law school credit hours; Exercising this option does not exceed my 1 elective course limit per semester; Exercising this option does not exceed my 4 elective courses limit during my law school career;					
Student Signature (must be handwritten)			ndwritten)		Date	
For off	ice use only					
Approved by:			Date:			
Denied by:			Date:		Student Notified: □ Yes □ No	