

Elective Satisfactory/Unsatisfactory Option

Spring 2020 Semester

I request permission to take the following course through the Elective Satisfactory/Unsatisfactory Option for the Spring 2020 Semester:

Course Title _____

Course # _____ Class# _____ Credits _____

Instructor Signature _____

Advisor Signature _____

For requests for major program requirements, the department chair signature is required. International students and athletes must have applicable signatures for all requests.

Department Chair of student's major _____

Director of International Programs _____

Coach or Athletic Director _____

I have read and understand the Elective Satisfactory/Unsatisfactory Option for the Spring 2020 Semester.

Student Name: _____ Emplid # _____

Student signature: _____ Date _____

Request must be submitted no later than May 8, 2020

Return complete form containing all required signatures to:

kathleen.meyer@dickinsonstate.edu