The College of New Jersey

Office of Records & Registration
P.O. Box 7718, Ewing, NJ 08628-0718
609-771-2141

APPLICATION FOR UNGRADED OPTION

NAME: Last First M.I.	ID #: ☐☐☐☐☐☐☐☐ (8 digit TCNJ ID #)
PHONE: EMAIL:	MAJOR:
ADDRESS: Street City State Zip	

CLASS: ☐ So. ☐ Jr. ☐ Sr.

COMPREHENSIVE POLICY STATEMENT OF UNGRADED OPTION FOR UNDERGRADUATE STUDENTS

1. Application for the Ungraded Option is available at http://www.tcnj.edu/~recreg/forms/index.html or in the Office of Records & Registration.

2. **Students must designate a course as "Ungraded Option" within the first two weeks of the semester. NO CHANGES ARE PERMITTED AFTER THIS TIME.**

3. The Ungraded Option is limited to matriculated students who have earned a minimum of 8 course units (32 credits) at TCNJ, with a minimum of a "C" (2.0) cumulative average. Students on academic probation are not permitted to exercise the Ungraded Option.

4. Course selection will normally be made among a student's free electives, but may include a challenging course within the major or minor, ONLY once the minimum graduation requirements for the major/minor are achieved. The Ungraded Option may NOT be used to meet Liberal Learning requirements.

5. Only one course per semester is permitted under the Ungraded Option.

6. A maximum of 4 Ungraded Option course units (16 credits) may be applied to a baccalaureate degree.

7. Grades of A, B, C, D will be converted to Crd (Credit). A grade of F will be converted to NCr (No Credit). The final grade (Crd or NCr) is not computed in the cumulative average. Only the grade Crd is credited toward graduation requirements.

8. The Ungraded Option courses do not apply to the minimum number of credits needed to be on the Dean's list or to graduate with honors.

9. The Ungraded Option is not available to Summer Session students.

10. The Ungraded Option cannot be used to repeat a course in conjunction with the "Repeat of Course Policy."

I have read the above regulations and wish to take the following course under the UNGRADED option:

Course # Course Title Instructor

SEMESTER: Year _____ ☐ Fall ☐ Spring

_____
Signature Date

FOR OFFICE USE ONLY
☐ Granted By Whom: _____

☐ Denied Date: _____

Reason: _____

_____

Effective: Spring 2004

Revised: 10/07