SATISFACTORY/UNSATISFACTORY (S/U) GRADING CONTRACT
University of South Florida
College of Visual & Performing Arts

Name ____________________________ USF ID# ____________________________

Major ____________________________ Phone# ____________________________

Reference Number _______ Prefix ________ Crse# ________ Section ______

TERM Fall 20____ Spring 20____
Summer A 20____ Summer B 20____ Summer C 20____

I hereby agree to participate in the S/U grading system for the course listed above. Further, I am aware of the regulation stating that once this contract is signed, I may not at some later date request an A-F letter grade.

Note: A maximum of 9 S/U credit hours in non-major courses may apply towards a degree in the College of Visual & Performing Arts.

Signature of Student ____________________________ Date ______

Signature of Instructor ____________________________ Date ______

Copy Distribution (The student is responsible for distribution.)

Advising Office ( ) Department ( ) Instructor ( ) Student ( )

sgs:S_U grading contract:2/13/06