

REQUEST TO AUDIT A COURSE

Student's Name: _____

Student Identification Number: _____

Department Name: _____

Course Number: _____

Section Number: _____

Academic Term/Year: _____

I understand the following:

- 1) University policy requires a student who audits a course to “. . . pay regular tuition and fees, and be regular in attendance . . . “
- 2) An audited course does not earn hours toward graduation.
- 3) Changing a course from credit to audit can affect my status as a full-time student.
- 4) An audited course appears on the academic transcript and grade report.
- 5) I must receive the approval of the instructor of the above course (see signature block below).
- 6) Graduate Students may not audit a course that is part of their Program of Study
- 7) Audit hours will not be used when determining your enrollment status for financial aid.

Instructor's Signature: _____

Date: _____

Student's Signature: _____

Date: _____

*Required after the first 5 days of class

Dean's Office Signature: _____

Date: _____

Registrar's Office: _____

Date: _____

Office Use Only	
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