



COURSE AUDIT REQUEST FORM

Student Name: _____

Address: _____

City, State, Zip: _____

Wish to audit:

Course Title: _____

Course Number: _____

Student Signature: _____ Date: _____

Students may not change from credit to audit (or vice versa) after the Add/Drop period ends.

NOTE: Students auditing courses will follow the same regulations as all other students in the class but they do not have to submit homework or take exams.

The student's transcript will reflect the course with an "AU" in place of a grade and there is no credit awarded.