

Audit Request Form

This form does not constitute an original registration for a course, and should be completed only for a course for which you are officially registered.

Courses may be audited only with the *consent* of the *instructor* of the course and *Department Chair or Faculty Advisor*.

The student must attend all classes and labs and participate in class in the manner expected of all students.

A student auditing a course will not be responsible for assignments or examinations, and no academic credit is earned for auditing a course. However, audited courses are noted on the student's official record by AU. A course taken for audit is counted as a course for course overload purposes.

The audit option must be declared by the end of the drop/add period (first week of class).

Name: _____

Student ID: _____

Student Signature: _____

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Term: _____ Fall _____ Spring _____ Summer

Course CRN (5 digits): _____

Course Number: _____ Section: _____

.....

Instructor's signature: _____

Student's Department Chair or

Faculty Advisor's signature: _____

***For VSB Students Only:**

Instructor's signature: _____

VSB Students-Clay Center

Advisor's signature: _____

****Please return completed form to the Registrar's Office****

