Course Audit Form

The completed form must be returned to the Registrar’s Office during the Drop/Add period of the specific semester that the course is being taken. Please refer to the University catalog section titled “Course Audit” for additional information. **No credit hours are earned for an audited course.**

Term _______________ Program: Day _____ Evening _____ Masters _______

CRN ___________ Dept. Prefix________________ Course # ____________________

Course Title _____________________________________________________________

Student Name ___________________________________________ ID Number ____________

Student Signature ___________________________ Date __________________________

Instructor’s Signature ___________________________ Date __________________________

For Office Use Only

Copy of completed form to the Financial Aid Office ________ Business Office ___________