

For Office Use Only:	Keyed In By: _____
Veteran – copy to VCO	Date _____

**REQUEST TO AUDIT FORM  
Spring 2019**

**I request to audit the courses listed below for the Spring 2019 semester.**

**Deadline to Change to Audit for 15-Week Full-term Courses: FEBRUARY 25, 2019**

This is the latest that a student can change from credit to audit status.

(Please ask your instructor for the last day to audit for courses that are not 15-week courses.)

**NOTE:**

- A student will not receive credit for a course which is audited. A grade of "AU" will be recorded on the transcript at the conclusion of the course.
- Students may not audit Legal Assistant courses or Hospitality cooking and baking courses. (HSP 101, 102, 113, 201, 202, 203)
- \*Students need permission of the program coordinator to audit selective admission program courses.\*
- \*Students need permission of the department chair, program coordinator or instructor to audit laboratory courses and IND studio courses.\*
- Students may audit CAD courses and ART/GRA studio/lab courses.

Name \_\_\_\_\_

I.D. # @ \_\_\_\_\_ Date of Birth \_\_\_\_\_

Phone Number \_\_\_\_\_ Are You a Veteran? \_\_\_\_ Yes \_\_\_\_ No

CRN	SUBJECT & COURSE #	SECTION

**I understand that once my status is changed to "Audit," my status cannot be reversed back to credit status.**

Student's Signature \_\_\_\_\_ Date \_\_\_\_\_

\*Signature \_\_\_\_\_ Date \_\_\_\_\_

\*SIGNATURE of Program Coordinator is REQUIRED to audit selective admission program courses. \*SIGNATURE of Department Chair, Coordinator or Instructor is REQUIRED for audits of laboratory or IND studio courses.

**Academic Dean's Signature is required if the request is after the Change to Audit deadline.**

Academic Dean's Signature \_\_\_\_\_ Date \_\_\_\_\_

**RETURN THIS FORM TO THE RECORDS OFFICE Room E102 or FAX to (203) 857-7012**