

# Request to Audit Course(s)

Students requesting to audit a course must pay full tuition and any applicable fees for the course(s) form with the Vice President of Instruction.

1. The student completes the form.
2. The student receives approval from the Vice President of Instruction.
3. The student brings the form to the Director of Admissions/Registrar.

Student ID Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ MI: \_\_\_\_\_

Address: \_\_\_\_\_  
Street/PO Box City State Zip

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Term: \_\_\_\_\_

## Courses to be Audited:

Course	Instructor Signature
Course	Instructor Signature
Course	Instructor Signature

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

Date \_\_\_\_\_

Vice President of Instruction \_\_\_\_\_

Date \_\_\_\_\_

Director of Admissions/Registrar \_\_\_\_\_

Date \_\_\_\_\_