Instructions: This form is to be used by undergraduate or graduate students who wish to take a course as an audit student. Please print and return completed form to the Registrar's office.

Fee: $185.00 per class

Please Print Clearly

Name: ___________________________________ Student ID Number: _______________________

Semester: ________________________________ Degree: ________________________________

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<table>
<thead>
<tr>
<th>Course ID</th>
<th>Section</th>
<th>Course Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ex. SCI 101</td>
<td>Ex. A</td>
<td>Ex. Biology I</td>
</tr>
</tbody>
</table>

Required Signatures:

Student: ________________________________________________________________

Signature __________________________ Date: __________

Registrar: _____________________________________________________________

Signature __________________________ Date: __________

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OFFICE USE ONLY

Entered in SONIS: ____________ Date: ____________

Copy to Student Accounts: ____________ Date: ____________