

						Student ID Number			
REQUEST FOR AUDIT					Т				
Name Enrolle			dle, Other)					Summer of 20	
Student Signature							Financial Aid representative signature (if applicable)		
regular fee fregulations a for the coursed ministration.	or the cour as other stu se. A studen vely withd diting a co	se. Audit wadents with accumulation accumulation at the urse may r	vill be on a n regard to ating an e e request esult in lo	ion to the University, a "space available" base be registration and atte excessive number of u of the instructor.  ss of financial aid or ca actional visa requirem	is. Students av endance, but t njustifiable al ertain eligibil	uditing cours they do not ta bsences in an ities. Audited	es are subjected to the examinations audited course m I courses do not co	o the same nor receive credit ay be	
CRN	Course Prefix	Course No.	Sect. No.	Instructor's Printed Na	ame	Instructor's	Signature	Date of Signature	
his form o	n ho sign	od alactro	nically if	Congred in Adoba					
This form can be signed electronically if opened in Adobe.  Advisor's Signature:							Office Use Only TSAAREV  Course Change Fee- F031		
Student's Si	gnature:						Final Gr	ade updated- SFASL	

\*A \$10.00 fee will be charged to your student account.

Processed by \_