SAMFORD UNIVERSITY

AUDIT STATUS

Name: _____ **Date:**_____
(Please Print) (Last) (First) (Middle)

Banner SUid: _____ **SU Email:** _____@samford.edu **SU Box: 29**_____

Telephone Number (Daytime): _____ **ETB Student: Yes** _____ **No** _____

I request permission to register for:

_____ **in the** _____ _____ **Semester/Term on an Audit basis.**
CRN, Course Prefix, & Number (i.e., 20849, ACCT 211) **Term** **Year**

Audit Student Guidelines

(from the Samford University Catalog)

Audit Status

As an alternative to full participation in a credit course, students may audit the course. Audit students do not receive grades and do not usually participate in examinations; however, instructors have the option of establishing requirements for a satisfactory audit. Students are not permitted to audit courses numbered above 400-level.

1. **Audit as Credit Student** – Students choosing this option must be admitted to Samford either as a Regular or Special Status Student. Students should enroll in the course to be audited using registration procedures and paying the same tuition as regular enrollees. Provided the instructor's requirements are met, the course will appear on the credit transcript with the notation AU and zero credits. If these requirements are not met, a W will be entered on the transcript.
2. **From a Grading/Credit Basis to an Audit Basis** – A student can change from a grading basis to an audit basis any time prior to the deadline for withdrawing from a class without academic penalty. There will be no financial refunds made as a result of change in grading basis.
3. **From an Audit Basis to a Grading/Credit Basis** – An audit student may not receive regular credit for a course begun as an audit, unless the change is made by the last day to add a course for the semester or term.

_____ _____
Student's Signature **Date**

_____ _____
Advisor's Signature **Date**

_____ _____
Approved: INSTRUCTOR'S Signature (or Dean, Department Chair, Professor) **Date**

**Please bring the completed form to the Registrar's office located in Samford Hall, Room 214 (Student Records) for consideration of approval by the Registrar.*

_____ _____
***Approval: Registrar's Signature** **Date**

The following is for OFFICE USE ONLY

Student Records _____ **Date Entered** _____

Student Notified of Approval _____
Date

Revised: 10/1/12