

## **Audit Application**

## Registrar's Office

University of Southern Indiana 8600 University Blvd. Evansville, IN 47712

Phone: 812-464-1762 Fax: 812-464-1911 Email: <u>registrar@usi.edu</u>

An undergraduate student who wishes to audit a course without credit must obtain permission from the instructor of the course and chair of the department that offers the course. No application for admission to the University is required to audit a course. Permission depends on space in the classroom and appropriateness of the class for audit. A student who audits a course will not appear on class rolls or grade reports, and no notation of the audit will be made on the student's permanent record (transcript). A student may not transfer from audit to credit status, or from credit status to audit status.

A student who wishes to audit a course should complete the audit application during the published dates of Late Registration (beginning the first day of the term). After securing the proper signatures, the form and fees must be submitted to the Bursar's Office (Cashier's window). There is a **\$50.00** audit fee *per course*, as well as any distance education fees and lab/special fees associated with the courses(s) being audited.

Term/Y	<b>'ear:</b> Fall_		Spring	Summer I		Summer II		
Are you	u currently	enrolled i	n coursew	ork for credit:	Yes	No		
Student ID Number:  000  or  Date of Birth:								
Name:	(Last, First	, M.I.)					<u>.</u>	
Addres	s:							
City:				State:		Zip Co	Zip Code:	
		1 _	l	I			2	
CRN	Subject	Course Number	Section Number	Instructor's Signature †		Department Chair's Signature	Bursar's Use Only Lab/DE/Other fees	
If a course	will use Black	board, the ins	tructor must o	contact Information Techn	ology (IT) t	to request that an auditing student	be added to the Bb roster.	
Lunder	stand that	by auditing	g a course,	. I will not appear on	the cla	ss roster nor will I receive	an official grade	
-			(s) I am au	diting. Further, I und	derstand	that I <b>cannot</b> transfer fro	m audit to credit	
or from	credit to a	audit.						
Student's Signature: Date:								
_		•		•		waiver benefit for this co		
Bursar'	s Use:							
Audit fee subtotal: \$ Lab/DE/other fee subtotal: \$ TOTAL OWED: \$								
I verify t	that the aud	lit fee and a	ny applicat	ole distance learning fo	ees and l	lab/special fees have been p	aid.	
Receint	#	Total na	ż hie	Cashier	Cashier		Date	