

Office of the Registrar Wille Administration Building Room 102 160 Convent Avenue New York, New York 10031

Tel: 212-650-7850 / Fax: 212-650-6108

AUDIT FORM

- 1. Obtain written permission from the Department Chair(s) as well as the Faculty member(s) on the bottom portion of this form.
- 2. Registration will take place before classes begin. (See the current Schedule of Classes or check online for location, dates and times).
- 3. Payment must be made to the Office of the Bursar. Tuition is the same as for credit.
- 4. Senior Citizens (60 years or over) pay a \$65.00 fee and a \$15.00 CUNY Consolidated Service fee for the semester. Documentation of proof of age is required. The following forms are acceptable with a valid photo ID: Medicare Card, Medicaid Card, or Birth Certificate. Acceptable photo ID's are Driver's License or NON-Driver's License ID. Senior citizens CAN ONLY audit undergraduate courses.
- 5. Audit status cannot be changed to credit status after closing date for late registration.

Please Print the Following Information:				Semester:		
				ID#		
Last	First Ci		Middle City State			
Street					Zip	
Tele No		Email Address				
Class Number	Department	Course Number	Section	Instructor Approval	Chairperson Approval	
			1			
Student Signature:				Date:		
NOTE FOR DEAM	N/CHAIRPERSON/I	NSTRUCTOR:				
vary at the discr The student ma	etion of the instruy y not receive cred form you are also	uctor and the studit it for course(s) ta	dent will follow ken by exemp	v all the regulations as listed in	re already audited the course(s).	
Dean Signature:				Date:		