Carnegie Mellon University
University Registrar's Office

Return this form with required signatures to the University Registrar's Office, Warner Hall, Lower Level.

Course Audit Approval

STUDENT INFORMATION

Student Andrew ID: _____

Student Name: _____
Last/Family, First and/or Preferred, MI

College: _____ Department: _____

Semester (*check one*): ☐ Fall ☐ Spring ☐ Summer-1 ☐ Summer-2 ☐ Summer-All   Year: _____

COURSE INFORMATION

Course Number: _____ - _____   Section: _____ Units: _____

Auditing is presence in the classroom without receiving academic credit, a pass/fail or a letter grade. The extent of a student's participation must be arranged and approved by the course instructor. A student wishing to audit a course is required to register for the course, complete the Course Audit Approval Form, obtain permission of the course instructor and their advisor, and return the form to the Registrar's Office prior to the last day to add a course.

Any student enrolled full-time (varies with each program) may audit a course without additional charges. Part-time or non-degree students who choose to audit a course will be assessed tuition at the regular per-unit tuition rate.

SIGNATURES

☐ *Approve*
☐ *Deny*

Student: _____   Date: _____
Print/Type Name   *Signature*   mm/dd/yyyy

☐ *Approve*
☐ *Deny*

Academic Advisor: _____   Date: _____
Print/Type Name   *Signature*   mm/dd/yyyy

☐ *Approve*
☐ *Deny*

Course Instructor: _____   Date: _____
Print/Type Name   *Signature*   mm/dd/yyyy

☐ *Approve*
☐ *Deny*

Student's Home Dean or Head of School: _____   Date: _____
Required for graduate students only.   *Print/Type Name*   *Signature*   mm/dd/yyyy

☐ *Approve*
☐ *Deny*

Student's Home Dean: _____   Date: _____
Required for course audits submitted after add/drop deadline.   *Print/Type Name*   *Signature*   mm/dd/yyyy

UNIVERSITY REGISTRAR'S OFFICE USE ONLY

Processed by _____   Date _____