APPLICATION TO AUDIT A COURSE

LUTHER COLLEGE
Office of the Registrar

NAME		ID#	DATE
E-MAIL ADDRESS		SPO	PHONE

YEAR IN SCHOOL: (circle one)   Senior   Junior   Soph.   Fresh.   Special

Term (circle one)   Fall   January   Spring   Summer I   Summer II

I wish to audit _____, subject to the provisions indicated below,
(course number & name)
approved by the instructor.

_____ Take no examinations
_____ Attend classes regularly
_____ Submit papers
_____ Submit written assignments
_____ Other _____

Full-time, degree seeking students:
I understand that I must have a cumulative GPA of 3.00 or above to audit a course. My GPA is _____.
Students with no Luther GPA are not be eligible to audit. There is no fee for full-time Luther students.

Part-time, non-degree seeking students:
Part-time students and area residents are responsible for a **<u>non-refundable</u>** audit fee plus any additional fees required for the course (i.e., music lesson charges, specific course fees, etc.). More information can be found at https://www.luther.edu/offices/financial-services/students/costs.

Audit registration occurs on the first day of classes by the Registrar's Office, if space is available in the course. You should not enroll yourself in a class you intend to audit. Only one audit per term will be approved.

I understand that I will not receive credit for this course. It will, however, appear on my transcript as AU (Audit; class attendance with no credit).

_____
Student's signature   ID#   Date

Application approved by_____
          Instructor's signature   Date

_____
          Registrar's signature   Date