BOSTON UNIVERSITY

Boston University | Office of the University Registrar
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Permission to Audit a Course Form

Last Name _____ **First Name** _____ **BUID** _____

Academic Semester _____ **Year** _____ **School/College** _____

College of Course _____ **Course Number** _____ **Section** _____ **Credits** _____

This form is used to request audit status and must be filled in completely.

Undergraduate students can change a course from credit to audit status up until the last day to add courses.

Semester dates can be viewed on the Registrar's Office website at *www.bu.edu/reg/calendars/semester*.

The University Audit policy can be viewed at *http://www.bu.edu/academics/policies/auditing-courses/*; individual schools/colleges may have additional policies, please consult that college's Bulletin for details.

- ☐ I understand that I will not recieve credit for this course.
- ☐ I understand that the course will not apply toward my degree.
- ☐ I understand that I will be charged the regular standard tuition and fees for this course.
- ☐ I understand that courses taken on an audit basis cannot be paid for with financial aid.
- ☐ I understand that a mark of "AU" will be recorded on my transcript unless I fail to meet the conditions specified below, in which case a mark of "W" will be assigned.

Please describe the conditions of participation agreed upon by student and instructor (i.e., class attendance, participation in discussion, presentations, assignments and grading, etc.).

Student Signature _____ **Date** _____

☐ I agree to allow the above named student to attend my course as an auditor, based on the conditions specified above.

Instructor Signature _____ **Date** _____