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## COURSE AUDIT REQUEST

**Instructions:** Please complete all information on the form and return to the Registrar’s Office for processing (electronic submissions are accepted). This form does not register you for the course. This is an application to Audit (Grade = AU) this course. Schedule this course as you would any other course adhering to standard deadlines. Incomplete forms will not be processed. This form must be submitted by the course withdrawal deadline found on the [academic calendar](#). Please refer to the [Undergraduate](#) or [Graduate](#) Catalog as applicable for more information on course audits.

Student Name: \_\_\_\_\_ Student ID: \_\_\_\_\_

**Course requested to take as Audit (*Note: you may audit only one course per semester*):**

Term	Year	Subject	Catalog #	Section #	# Credits	CRN ( <i>optional</i> )

**This section to be completed by the course instructor. Approval is required.**

I approve this request. Instructor Name (Print): \_\_\_\_\_

Date: \_\_\_\_\_ Instructor Signature: \_\_\_\_\_

### Agreement

I understand that once this agreement is made, it may not be changed. I further understand that the grade of audit (AU) will be recorded and the course may not be counted towards a degree requirement. The course will be carried on my transcript and will be counted for billing purposes.

The agreement applies only to the course listed above and is not transferable. A grade of AU will automatically be assigned to this course during the grading cycle as outlined on the academic calendar.

Fees: If part-time, the per credit fee applies. If full-time, there is no additional charge if the student remains within the full-time credit limit for the semester. If beyond the full-time credit limit (overload), additional per credit rate fees apply.

Student Signature (*required*): \_\_\_\_\_ Date: \_\_\_\_\_