Print Form



Office of the USCB Registrar

Audit Course Registration Exception Form

| Addit Course Registration Exception For | 11 | | | |
|--|----------------|--------------------|-------------------|-----------------|
| Submit this form to request audit registration transaction. Carolina. Refunds associated with these transaction deadlines. In order to submit this form you must answer NO to | s are based c | n published co | | |
| NO YES Are you submitting this form to re to add/drop? If you answered yes, you must comp | • | | | |
| NO YES Are you submitting this form after cannot submit this form. | the last day o | of class? If you a | answered yes, you | |
| Student Name: | | | | |
| Last | First | | Middle Initial | |
| Student USCB ID: | | | | |
| Term: Spring Summer Mayme | ester/Summer I | Summer II | Year: | |
| requested action | CC SUBJECT | OURSE COURSE# | COURSE CRN | CREDIT HOURS |
| Add Audit Students must be registered in the course before submitting this form. | | | | |
| nango Aligit Lo (rodit | | | | |
| Change Audit To Credit Through the Last Day to Add/Drop) | | | | |
| Through the Last Day to Add/Drop) Drop/Delete Audited Course Through the Last Day to Add/Drop) | | | | |

AUDITING POLICY

SCIENCE LABS CANNOT BE AUDITED
AUDITED COURSES MAY NOT BE REPEATED FOR CREDIT

Student Signature:

Instructor Signature: _____

Processed in the USCB Registrar's Office by:

Signing this form acknowledges that this request may affect fees and financial aid eligibility

Date:_____

Date:_____

Date: _____