

Student Signature: _



Class Audit Permit Student Name: (Please print current name on file) ID #: (If you do not have an ID#, please provide Driver's License # / State)

Students auditing classes do not receive academic credit and do not have the course or courses listed on their academic record. Enrollment as an auditor does not permit the enrollee to take examinations, to have tests or other papers checked by the instructor, or to participate in the class discussion. **Important**: Student may not audit a fully on-line or hybrid taught course.

Co	ourse to be audited:			
	Term/Year (Ex: Fall 2017, Spring 2018)	Subject (Ex: ENGL, MATH, CHEM)	Course Number (Ex: 1301, 2411, 4312)	Section (Ex: 01, 05, 09)
	Instructor's Name	Instructor's	s Signature	Date

THE **DEADLINE** TO REQUEST PERMISSION TO AUDIT A CLASS IS CENSUS DATE FOR THE TERM **For dates, see the Academic Calendar available online through http://my.utrgv.edu

PLEASE PAY \$50 FEE TO THE BURSAR'S OFFICE
AUDIT FEE IS NOT REFUNDABLE

**Fee not required if person is at least 65 years of age

A VALID STUDENT ID OR GOVERNMENT ISSUED ID MUST BE PRESENTED WHEN SUBMITTING THE FORM