

PERMISSION TO AUDIT

Student Name: _____ Cortland ID Number: C00-_____

Local Address: _____ Local Telephone Number: _____

City: _____ State: _____ Zip: _____ E-mail: _____

Program/Degree: BA BFA BS BSED CAS Major: _____

MA MAT MS MSED MST

Please check one: I have previously or currently or never attended SUNY Cortland.

If previously, when did you attend: _____

Note: Previously dismissed/suspended students must have the approval of their associate dean to audit a course and must meet the conditions for re-admission to the College.

Auditing a course is subject to the following regulations.

1. Auditors may be accepted into classes only with the consent of the instructor and will be denied admission to classes that have reached the maximum number of enrolled students.
2. Course auditors normally will not be charged any tuition, but will pay all laboratory and other fees connected with the course.
3. Course auditors will not be enrolled nor listed on an official class roster. They will attend without credit or formal recognition and are not required to meet the requirements of the course.
4. Course auditors may not subsequently request credit for the course although they may have completed all course requirements.
5. Course auditors will be permitted for on-campus courses only (for example, course audits are NOT allowed in the following off-campus courses: internships, student teaching, practica, field work, independent study, thesis, study abroad or similar type courses).

I agree to the above regulations and seek permission to audit the course listed below.

Signature: _____ Date: _____

<i>Semester/Term</i>	<i>CRN</i>	<i>Course Prefix</i>	<i>Course #</i>	<i>Section #</i>	<i>Instructor</i>

Audit request approved by instructor:

Signature: _____ Date: _____