

REQUEST TO AUDIT FORM

Registrar's Office

One Main Street, Suite N330, Houston, Texas 77002-1001

uhdrecords@uhd.edu

713-221-8999



If you wish to audit a course (take a course on a non-credit basis), you can do so by having the instructor in that course sign this Form. You must follow ALL regular admission and registration procedures including payment of tuition and fees. Credit is not given for an audit course, nor may a change to credit status be made after you have submitted a request to audit

STUDENT ID NUMBER

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DATE OF BIRTH

Month Day Year

FULL NAME – as it appears in UHD records (please print)

Last First Middle

Maiden name Previous last name E-mail Address

CONTACT INFORMATION

Telephone – Home number
Area code

Telephone – Work number
Area code

Please provide the following information for the class(es) to be audited:

COURSE NAME				COURSE NUMBER				CRN NUMBER				INSTRUCTOR APPROVAL

**** Only after this form is properly completed, signed by your instructor and validated by the Registrar's Office by the Official Day of Record of the current semester, are you then, officially changed from REGISTERED to AUDIT status****

Student Signature

Date

****A print out of your new class schedule will be stamped by the Registrar's Office as your confirmation receipt ****

Received by _____ Processed by _____