Bentley University

Date: _____

PERMISSION TO AUDIT AN UNDERGRADUATE CLASS
(Audit is Not Permitted in Graduate Courses)

Program (please circle): Day Evening Regular Term: _____

Student's Name_____ Student ID# _____

Local Address: _____

Telephone Number: _____

Course Title: _____

Course Number and Section: _____

Instructor: _____

I hereby petition the University for permission to audit this course. I understand that I will be required to pay full tuition charges for the course. If I desire, I may take the examinations for the course, but will receive no credit for them. Finally, my transcript will contain a memorandum entry that I audited the course.

_____
Student's Signature

PERMISSION TO AUDIT COURSE

Instructor's Signature: _____ Date: _____

AUDIT POLICY: A Student may audit no more than one course per semester. Audit status MUST be declared before the end of the THIRD WEEK of classes with the requirements for the retention of such status to be spelled out to the student by the individual instructor. If the requirements are not fulfilled, the AU status can be changed to a W. After the first three weeks, the AU status cannot be changed to a credit status.