Current degree-seeking students may elect a regular audit of a course, meaning they are registered for a course but receive no credit. A final grade of “AU” will be reflected on the student’s transcript. The following guidelines apply for regular audits:

- Tuition is charged at ½ the credit rate for regular audits. Students who audit a class that would take them beyond 16 credits will be charged for the additional credits at the regular audit rate.
- Registration is subject to space availability and students may sign up to audit a class on the first day of class. MTSE courses may not be audited.
- Audited courses must be dropped by the last day to drop courses to avoid tuition fees.
- Audited courses do not count towards full-time enrollment.
- Students wishing to audit an activity course (HPW, OEL), art, theater, writing, or computer science course must obtain written permission from the instructor.
- Only students accepted to Master degree programs may audit graduate classes.
- Students who are not nursing majors may audit nursing courses with permission of the instructor.
- The audit technology fee of $50 will apply to classes being audited.

I, _____________________________________________________________ , request permission to enroll

Student’s Name (please print)

in ___________________________________________ _____________________________

Dept./Course No./Section Course Title

as an audit for ________________ _____________________________

Semester Year

By signing below, I certify that I have read and understand the guidelines as stated above and that I am enrolling in this course for personal interests and will not receive credit nor will the audited course count towards any requirement for my major or minor. I agree to observe all the rules and regulations of Westminster College and to pay all tuition and fees assessed by the college as well as any costs associated with the collection of the tuition and fees I owe.

Student Signature _____________________________ Date _________________

Student ID # _____________________________

Instructor Signature (if required) _____________________________ Date _________________

Office Use Only:

Entered By _____________________________ Date _________________

Revised 10.2.18