



COURSE AUDIT REQUEST UNDERGRADUATE LEVEL

Loyola University Chicago, Registration and Records 820 N. Michigan STE 504, Chicago, Illinois 60611 (ph) 312-915-7221 ~ (fax) 312-915-6452 www.luc.edu/regrec

This form must be given to the student's dean for submission to the Office of Registration & Records. This request will be processed only if it comes directly from the student's dean.

Student's Name*:						Today's Date:				
LUC Student ID #*:							Student's	@luc.edu		
		Signature: The of the rules gov					d ID# above	e has "signed" t	this form and is	
Academic Career (School):							Program:			
TERM:	O Fall	O Winter	0	Spring	Summe	er YE	EAR taken:		_ (or 4 numeral term code)	
Course Title:										
				Subject.	Course Number	Section Number	Term Hours			
		Exan	nple:	ACCT	201	002	3			
In Addition to this course the student he or she is taking credit hours. A review of the student's total term hours indicates that auditing this course does does not impact his or her status registering for this course as an audit. (see 4 & 5 below)										
Comments helpful to this request (the body of your email may be used to provide additional information):										
AUDITING UNDERGRADUATE COURSES http://luc.edu/academics/catalog/undergrad/reg_gradinsystem.shtml										
1. With the Dean's approval, students wishing to take a course without receiving credit may audit the course										
2.	and pay the applicable tuition. Class attendance is required; the mark of "AU" is entered for successful completion of the course, the mark									
3.	of "W" is assigned for failure to attend class without properly dropping. Assignments, including examinations and term papers are not required, but auditors have the right to									
٥.	participate in class discussion.									
4. A course that is audited does not count as hours attempted.5. A course that is audited is not considered in determining a student's full-time or part-time academic status.										
6.	6. A course may not be converted from a graded basis to an audit after the first two (2) weeks of the semester									
	or the first	week of a sun	nmer	session.						
Dean's	Approval . I	Please make c	ertai	n that all	requested i	nformatior	n has been s	supplied.		
Dean's Name/Signature						Date:				
		by clicking h							C ID on Subject line	