SGPS Graduate Course Audit Form

This form is to be used by graduate students wishing to audit a graduate-level course.

Please see 6.04 of the Graduate Regulations for important information regarding auditing graduate courses.

Student Name:

Graduate Program:

Student Number:

Degree:

AUDIT	DROP AUDIT	SUBJECT/COURSE TITLE	COURSE NUMBER	SECTION	TERM	INSTRUCTOR'S SIGNATURE OF APPROVAL

Comments/Expectations:
(must be completed by the course instructor)

After obtaining all necessary signatures, submit this form to the Office of the Registrar.

Student Signature	Date	Supervisor Signature	Date

Graduate Chair Signature	Date	SGPS Approval	Date