



Permission to Audit Form

Today's Date (YYYY/MM/DD):							

Student Number:							

The **Permission to Audit** form is an agreement between an instructor and a student who intends to **enrol in a course without receiving credit**, as per College of the Rockies' 2.1.4 *Course Audit* policy. To change to "audit" status, the student must:

1. Obtain instructor permission through the completion of this form.
2. Submit the *Permission to Audit* form to Enrolment Services for processing.
3. Register and pay full tuition fees for the course, and purchase text books and supplies.

SECTION A Completed by *STUDENT*

Last Name:	First Name:
Phone Number(s):	Email Address:

Semester & Year <i>(e.g. Fall 2018)</i>	Course Name <i>(e.g. ENGL)</i>	Course # <i>(e.g. 101)</i>	Section # <i>(e.g. 01)</i>	Instructor <i>(please print)</i>

SECTION B Completed by *INSTRUCTOR*

The student agrees to meet the following course requirements, as detailed in course outline and/or syllabus:
mark all that apply

Preparation (specify which, if not all: course readings, homework, etc.)

Attendance and Participation (specify which, if not all: group work, field trips, etc.)

Assignments (specify which, if not all: papers, research projects, etc.)

Exams (specify which, if not all: quizzes, tests, mid-term(s), final, group, oral, etc.)

- Yes No *The instructor agrees to provide written/oral feedback on the student's work*
 Yes No *The instructor agrees to provide (advisory) grades on the student's work*

NOTE: Audited courses cannot be used to meet minimum course load requirements for Student financial assistance

DECLARATION

Freedom of Information/Protection of Privacy

The College of the Rockies complies with the Freedom of Information/Protection of Privacy legislation of the Province of British Columbia. Information collected on this form is used in the normal course of College operations in accordance with this legislation.

Please read the following before signing:

I declare that the information contained in this form is to the best of my knowledge, complete and correct. I hereby agree to comply with the rules and regulations of the College.

Student's Signature: X	Date: (YY/MM/DD)	Instructor's Signature: X	Date: (YY/MM/DD)
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FOR REGISTRAR OFFICE USE ONLY

Change from Credit to Audit and entered into Colleague by: _____ Date: _____

NOTE: Students requesting a status change from "Credit to Audit" shall do so by the end of the fourth week for a 15-week semestered course, or the end of the second week of an intersessional semester, or 20% from the start of the course delivery hours.