

The University of Alabama at Birmingham  
 The Graduate School  
 G03 Lister Hill Library  
 1700 University Boulevard  
 Birmingham, AL 35294-0013

## PERMISSION TO AUDIT GRADUATE LEVEL COURSEWORK\*

Identifying Information		
First Name	Middle Initial	Last Name
Blazer ID	Phone Number	
Address (Street, City, State, Zip)		

### Course Information

I wish to enroll in the following course(s) for no-credit (Audit) for the \_\_\_\_\_ term during \_\_\_\_\_ year. **Futhermore, I understand that enrollment in audited courses requires payment of full tuition and fees.**

\_\_\_\_\_  
*Student's Signature*    \_\_\_\_\_  
*Date*

Call Number	Course and Section Number	Course Title	Hours	Instructor's Signature
1.				
2.				
3.				

### Approvals

I recommend that this student be allowed to take the course(s) specified above.

\_\_\_\_\_  
 Advisor \_\_\_\_\_  
Date

\_\_\_\_\_  
 Graduate Program Director \_\_\_\_\_  
Date

\_\_\_\_\_  
 Chairman (Dept. of Audited Course) \_\_\_\_\_  
Date

I approve the above request

I do not approve the above request.

\_\_\_\_\_  
 Graduate School Director \_\_\_\_\_  
Date

***\*This approval must be secured prior to registration.***