

Audit Request Form

I request to take the course listed below on an audit basis. I understand that in signing this form, I have only the first six (6) days of the semester to change to credit status. I also understand that audited courses are not included in my cumulative grade point average and that the credit value is calculated in the assessment of tuition. I understand that I am liable and must pay for the tuition of this course.

Tech ID# *:

Date:

Last Name:

First Name:

Middle Initial:

Course# (ex: ACCT 1001):	Course Title:		
Course ID#:	Credits:	Class days:	Year and Term:

Learner Signature

Date

Course Instructor Signature

Date

August 09

* Northwest Technical College is asking you to provide information that includes private information under the Minnesota Government Data Practices Act (MGDPA). Northwest Technical College is requesting this information to be able to correctly identify your records. You are not legally required to provide the information Northwest Technical College is requesting and may refuse to provide it. Only the Registrar (or designee) will receive and use this completed form.